2007 FOR PROFIT CORPORATION ANNUAL REPORT

07-09-2007 90044 014 ***400.00

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07 AUG 17 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07032007 Chg-P CR2E034 (12/06)

DOCUMENT # M35934

1. Entity Name
OASIS TRAVEL & TOURS, INC.

Principal Place of Business	Mailing Address
OLINDA PINANEZ VALDERRAMA 114 MADEIRA AVE. CORAL GABLES, FL 33134-4516	OLINDA PINANEZ VALDERRAMA 114 MADEIRA AVE. CORAL GABLES, FL 33134-4516

2. Principal Place of Business No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 59-2726044 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VALDERRAMA, OLINDA PINANEZ 114 MADEIRA AVE. CORAL GABLES, FL 33134	Name: Pinancz, Olinda Street Address (P.O. Box Number is Not Acceptable): 114 Madeirs Ave City: Coral Gables FL Zip Code: 33134

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Olinda Pinanez

FILE NOW!!! FEE IS $550.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY ST ZIP	DP PINANEZ, OLINDA P 114 MADEIRA AVE. CORAL GABLES, FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Olinda Pinanez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oasis Travel & Tour, Inc.
114 Madeira Avenue, Coral Gables, Florida 33134

August 8, 2007

Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

RE: OASIS TRAVEL AND TOURS INC
Reference number: M35934 Annual Report

I regret to inform you that we have never received the original request for payment of this account. Only when we wanted to inquire some pending information regarding to the Corporation we noticed its lack of payment.

Please review history of my account to verify that we have never delayed any payments in the past. We had always paid the minimum amount due.

I request, hereby, that you kindly consider charging $150.00, and reimbursing the balance.

Your assistance and cooperation to this request will be very much appreciated.

Sincerely,

Olinda Pinanez

Olinda Pinanez
President