

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90376 030 ****70.00

DOCUMENT # N00000007704

1. Entity Name

OASIS COMMUNITY DEVELOPMENT CORPORATION, INC.

Principal Place of Business

**3301 NW 72 AVE
 HOLLYWOOD FL**

Mailing Address

**3301 NW 72 AVE
 HOLLYWOOD FL**

2. Principal Place of Business

3. Mailing Address

Post Office Box 291510

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
FT. LAUDERDALE, FL

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Zip
33329-1510

Country
U.S.A.

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

**RISI, RICHARD
 15068 SW 10 STREET
 SUNRISE FL 33326**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
 NAME **RISI, RICHARD**
 STREET ADDRESS **P O BOX 291519**
 CITY-ST-ZIP **FT LAUDERDALE FL 33329-1510**

TITLE **P/D** ☒ Change ☐ Addition
 NAME **RISI, RICHARD**
 STREET ADDRESS **15068 S.W. 10TH STREET**
 CITY-ST-ZIP **SUNRISE, FL 33326**

TITLE **V** ☐ Delete
 NAME **PRESSMAN, MARVIN**
 STREET ADDRESS **P O BOX 291519**
 CITY-ST-ZIP **FT LAUDERDALE FL 33329-1510**

TITLE **V/D** ☒ Change ☐ Addition
 NAME **PRESSMAN, MARVIN**
 STREET ADDRESS **3999 SIMMS STREET**
 CITY-ST-ZIP **HOLLYWOOD - FL 33021**

TITLE **D** ☐ Delete
 NAME **SOLOMON, GLORIA**
 STREET ADDRESS **P O BOX 291519**
 CITY-ST-ZIP **FT LAUDERDALE FL 33329-1510**

TITLE **D** ☒ Change ☐ Addition
 NAME **SOLOMON, GLORIA**
 STREET ADDRESS **7360 NW 38th STREET, NO.2**
 CITY-ST-ZIP **HOLLYWOOD, FL 33024**

TITLE **D** ☒ Delete
 NAME **BADER, BOB**
 STREET ADDRESS **P O BOX 291519**
 CITY-ST-ZIP **FT LAUDERDALE FL 33329-1510**

TITLE **S/T/P** ☒ Change ☒ Addition
 NAME **STOUT, JAMES**
 STREET ADDRESS **2461 SW 102nd AVENUE**
 CITY-ST-ZIP **MIRAMAR, FL 33026**

TITLE **D** ☐ Delete
 NAME **MCCANT, ANDERSON**
 STREET ADDRESS **P O BOX 291519**
 CITY-ST-ZIP **FT LAUDERDALE FL 33329-1510**

TITLE **D** ☒ Change ☐ Addition
 NAME **MCCANT, ANDERSON**
 STREET ADDRESS **2812 DEWEY STREET**
 CITY-ST-ZIP **HOLLYWOOD, FL 33024**

TITLE **D** ☐ Delete
 NAME **RICHARDS, JAMES**
 STREET ADDRESS **P O BOX 291519**
 CITY-ST-ZIP **FT LAUDERDALE FL 33329-1510**

TITLE **D** ☒ Change ☐ Addition
 NAME **RICHARDS, JAMES**
 STREET ADDRESS **610 S.W. 71ST WAY**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33023**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

SIGNATURE REQUIRED
RICHARD RISI, PRES.

4/27/01

954-557-3301

CR2E037 (10/00)