2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jan 25, 2005
Secretary of State

DOCUMENT# N01000008702

Entity Name: OASIS INTERNATIONAL, INC.

Current Principal Place of Business:

1722 SUWANEE DR
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

1722 SUWANEE DR
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 01-0566706 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCGEE, SHERRY REV
1722 SUWANEE DR
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	MCGEE, SHERRY REV	
Address:	1722 SUWANEE DR	
City-St-Zip:	WEST PALM BEACH, FL 33409	
Title:	VD	( ) Delete
Name:	HILL, AVIS L REV	
Address:	1700 SUWANEE DR	
City-St-Zip:	WEST PALM BEACH, FL 33409	
Title:	D	( ) Delete
Name:	GILLENWATER, PAULA	
Address:	4607 ARLETTE CT.	
City-St-Zip:	LAKE WORTH, FL 33461	
Title:	D	( ) Delete
Name:	CLAPSADDLE, ALAN	
Address:	146 DUKE DR.	
City-St-Zip:	LAKE WORTH, FL 33460	
Title:	D	( ) Delete
Name:	SAWYER, ROBERT	
Address:	11351 57TH RD N.	
City-St-Zip:	WEST PALM BEACH, FL 33411	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VD/S	(X) Change ( ) Addition
Name:	HILL, AVIS L BISHOP	
Address:	1700 SUWANEE DR	
City-St-Zip:	WEST PALM BEACH, FL 33409	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERRY MCGEE P 01/25/2005

Electronic Signature of Signing Officer or Director — Date