2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003456

Entity Name: IGLESIA OASIS DE JESUS INC.

FILED Jan 16, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1629 SE 47TH STREET CAPE CORAL, FL 33904				4712 SE 15THAVE CAPE CORAL, FL 33904	
Current Mailing Address:			New Maili	New Mailing Address:	
1109 SE 15 CAPE COF	STREET RAL, FL 33990				
FEI Number: 65-0933069 FEI Number Applied For () FEI		FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1109 SE 15	, HECTOR J 5TH ST RAL, FL 33990	US			
The above in the State		ubmits this statement for the pu	irpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
OFFICERS	AND DIRECT	ORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TD () MANZANO, HEC 1109 SE 15TH S CAPE CORAL, F	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () MANZANO, ALIO 1109 SE 15TH S CAPE CORAL, F	ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () LIVERMON, MIR 1000 SW 54 LN CAPE CORAL, F		Title: Name: Address: City-St-Zip:	VD (X) Change () Addition ALE, OMAR 902 SE 31 STREET CAPE CORAL, FL 33904	
Title: Name: Address: City-St-Zip:	ATD () ORTIZ, JOSE AN 5331 SUMMERL FORT MYERS, F	IN RD APT 10	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition LIVERMON, MIRNA 1000 SW 54TH LANE CAPE CORAL, FL 33914	
Title: Name: Address: City-St-Zip:	ASD () ARIAS, ANA 4137 SW 7 AVE CAPE CORAL, F		Title: Name: Address: City-St-Zip:	ASD (X) Change () Addition CANCEL, ABDIN 1119 SE 13TH AVE CAPE CORAL, FL 33990	
Title: Name: Address: City-St-Zip:	VD () ALE, OMAR 902 SE 31 STRE CAPE CORAL, F		Title: Name: Address: City-St-Zip:	ASD (X) Change () Addition MALDONADO, PLACIDA 2113 SW 28TH LANE CAPE CORAL, FL 33914	

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: OMAR ALE VD 01/16/2005