2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005976

MUNIZ, JOSE

2025 SHEELER AVE

APOPKA, FL 32703

Name: Address:

City-St-Zip:

FILED Apr 04, 2007 Secretary of State

Entity Name: OASIS DE ESPERANZA A/G, INC. **Current Principal Place of Business: New Principal Place of Business:** 2025 SHEELER AVE APOPKA, FL 32703 **Current Mailing Address: New Mailing Address:** 2025 SHEELER AVE APOPKA, FL 32703 FEI Number: 59-3609773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIBERIO, JIMMY 2333 SWEETAIRE CT. APOPKA, FL 32712 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SIBERIO, JIMMY Name: Name: Address: 2025 SHEELER AVE Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: PABON, AWILDA Name: Address: 2025 SHEELER AVE Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JIMMY SIBERIO PD 04/04/2007