2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 30, 2007 08:00 All Secretary of State DOCUMENT # P00000025289 OASIS SUN RESORTS, INC. Principal Place of Business Mailing Address 130 SOUTH MAIN STREET 130 SOUTH MAIN STREET WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 01032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3714906 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent PIGOZZI, WILLIAM D DO NOT WRITE 130 SOUTH MAIN STREET WINTER GARDEN, FL 34787 IN THIS SPACE 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. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS HILF PIGOZZI, WILLIAM D NAME 130 SOUTH MAIN STREET STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 U000000741845 TITLE 05/15/07-80046-003 150.do NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 supplimental 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 of 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 any address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

RE AND TYPED OR PRINTED NAME OF SIG

FILED