

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090668

FILED
Apr 30, 2004
Secretary of State

Entity Name: OASIS TROPICAL PLANT SERVICES, INC.

Current Principal Place of Business:

360 N.E. 19TH AVENUE
APARTMENT #1
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

365NE 24TH ST
BOC RATON, FL 33431

Current Mailing Address:

P.O. BOX 272205
BOCA RATON, FL 33427

New Mailing Address:

FEI Number: 06-1645355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLEN, BRIAN J
360 N.E. 19TH AVENUE
APT. #1
DEERFIELD BEACH, FL 33441

Name and Address of New Registered Agent:

BOLEN, BRIAN J
365 NE 24TH ST
BOCA RATON, FL 33431

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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOLEN, BRIAN J
Address: 360 N.E. 19TH AVENUE, APT. 1
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOLEN, BRIAN J
Address: 365 NE 24TH ST
City-St-Zip: BOCA RATON, FL 33431

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN BOLEN

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date