

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000120857

Entity Name: OASIS CMHC, INC.

FILED
Oct 23, 2007
Secretary of State

Current Principal Place of Business:

3300 NW 79 AVE SUITE 320
MIAMI, FL 33166

New Principal Place of Business:

6095 NW 72 AVE
MIAMI, FL 33166

Current Mailing Address:

3300 NW 79 AVE SUITE 320
MIAMI, FL 33166

New Mailing Address:

6095 NW 72 AVE
MIAMI, FL 33166

FEI Number: 11-3725639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YABOR, SAHILY
3300 NW 79 AVE SUITE 320
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

YABOR, SAHILY
6095 NW 72 AVE
MIAMI, FL 33166 US

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: SAHILY YABOR

10/23/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YABOR, SAHILY
Address: 3900 NW 79 AVE STE 320
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: YABOR, SAHILY
Address: 6095 NW 72 AVE
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAHILY YABOR

P

10/23/2007

Electronic Signature of Signing Officer or Director

Date