2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State
02-06-2006 90061 031 ***150.00

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1. Entity Name
OASIS FARMS, INC.

Principal Place of Business	Mailing Address
3100 HIGHWAY 441 SOUTH OKEECHOBEE, FL 34974	16100 SW PALOMINO STREET INDIANTOWN, FL 34956-3740

01052006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. 204
City & State	City & State Pompano Bch FL
Zip / Country	Zip 33064 / Country USA

4. FEI Number ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLS, BRENDA L 3100 HIGHWAY 441 SOUTH OKEECHOBEE, FL 34974	Name JEAN, MARCELIN Street Address (P.O. Box Number is Not Acceptable) 201 NW 32nd CT APT 204 City Pompano Bch FL Zip Code 33064

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.

SIGNATURE MARCELIN JEAN — 01-27-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO SIMMONS, ROBERT S P.O. BOX 1637 INDIANTOWN, FL 34956	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO JEAN, MARCELIN 201 NW 32nd Court APT 204 Pompano Beach, FL 33064 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SIMMONS, BELKIS J P.O. BOX 1637 INDIANTOWN, FL 34956	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Joseph, Lamercia 201 NW 32nd Court APT 204 Pompano Beach, FL 33064 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MILLS, MICHAEL S 16100 SW PALMOMINO STREET INDIANTOWN, FL 34956	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec/Tr DiFAEINE, Frank J 651 NW Sample Rd Pompano Beach, FL 33064 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MILLS, BRENDA L 16100 SW PALMOMINO STREET INDIANTOWN, FL 34956	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 supplemental 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 or 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 an address, with all other like empowered.

SIGNATURE: _____ 754-246-7224 — 1-27-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #