

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000029877

**FILED**  
**Oct 08, 2009**  
**Secretary of State**

**Entity Name:** OASIS MEDICAL AND REHABILITATION CENTER, INC.

**Current Principal Place of Business:**

7171 SW 24TH STREET  
210  
MIAMI, FL 33155 US

**New Principal Place of Business:**

8900 CORAL WAY  
103  
MIAMI, FL 33165 US

**Current Mailing Address:**

7171 SW 24TH STREET  
210  
MIAMI, FL 33155 US

**New Mailing Address:**

8900 CORAL WAY  
103  
MIAMI, FL 33165 US

**FEI Number:** 20-8594335

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAIT, YANURYS  
7171 SW 24TH STREET  
210  
MIAMI, FL 33155 US

**Name and Address of New Registered Agent:**

TAIT, YANURYS  
2600 SW 142 AVE  
MIAMI, FL 33175 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: YANURIS TAIT

10/08/2009

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: TAIT, YANURYS  
Address: 7171 SW 24TH STREET # 210  
City-St-Zip: MIAMI, FL 33155 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TAIT, YANURYS  
Address: 2600 SW 142 AVE  
City-St-Zip: MIAMI, FL 33175 US

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: YANURIS TAIT

P

10/08/2009

Electronic Signature of Signing Officer or Director

Date