

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000038785

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE OASIS GROUP IV INC.

Current Principal Place of Business:

16186 NW 27TH AVENUE
SUITE B
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

16186 NW 27TH AVENUE
SUITE B
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 64-0960802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESSASSAU, DEAUNDREA A
20210 NW 42ND AVENUE
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DESSASSAU, DEAUNDREA A
Address: 20210 NW 42ND AVENUE
City-St-Zip: MIAMI, FL 33055

Title: VP () Delete
Name: MATTHEWS, HARRIET L
Address: 110 TWIN SPRINGS TRAIL
City-St-Zip: NORCROSS, GA 30093

Title: VP (X) Delete
Name: MATTHEWS, NICHOLE K
Address: 2184 NW 171 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T (X) Delete
Name: MAZYCK, NATHAN L
Address: 2422 RODMAN STREET
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DESSASSAU, DEAUNDREA A
Address: 20210 NW 42ND AVENUE
City-St-Zip: MIAMI, FL 33055

Title: PRES (X) Change () Addition
Name: MATTHEWS, NICHOLE K
Address: 2184 NW 171 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NICHOLE K MATTHEWS

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date