

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000077437

Entity Name: OASIS MEDICAL INC.

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

415 WEST 49TH STREET
SUITE 2
HIALEAH, FL 33012 US

Current Mailing Address:

3470 E COAST AVE.
#1001
MIAMI, FL 33137 US

FEI Number: 26-0523043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARDO, JUAN A
3470 E COAST AVE.
#1001
MIAMI, FL 33137 US

New Principal Place of Business:

415 WEST 49TH STREET
SUITE A
HIALEAH, FL 33012 US

New Mailing Address:

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

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: PARDO, JUAN A
Address: 3470 E COAST AVE. #1001
City-St-Zip: MIAMI, FL 33137 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: PARDO, JUAN A
Address: 3470 E COAST AVE. #1001
City-St-Zip: MIAMI, FL 33137 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: JUAN A. PARDO

CEO

05/08/2009

Electronic Signature of Signing Officer or Director

Date