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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000046478 (2)

OASIS ENTERTAINMENT, INC.

Principal Place of Business
18524 N.W. 67TH AVE. SLITE 159
MIAMI FL 33015

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zip

Mailing Address

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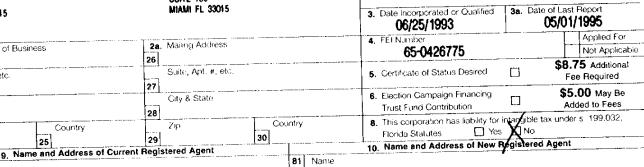
Country

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HANNAN-ANTON, LAURIE ESQ

18524 NW. 67TH AVE.

18524 N.W. 67TH AVE. SUITE 159 MIAMI FL 33015



Street Address (P.O. Box Number is Not Acceptable)

83 #159 Zip Code 85 MIAMI FL 33015 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.

SIGNATURE	grature. By end or printed name of requirement agreet and their map in	a.e. (1 40	Tr. Registered Agent's gradure required:	wherenshing DATE
	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD	DELETE	1.11716	Change C Mac Pari
1	JACQUES, DIANE		1.2 NAME	
NAME	C/O 18524 NW 67TH AVE #159		1.3 STREET ADDRESS	
STREET ADDRESS	FT. LAUDERDALE FL 33015		140/TY-ST-7/P	Change Addition
CITY - ST - ZIP	VD	DELETE	2 1 11l: E	Change Addition
NAME	HANNAN-ANTON, LAURIE ESQ		2.2 NAME	
	18524 NW 67TH AVE., #159		2.3 STREET ADDRESS	
STREET ADDRESS	MIAMI FL 33015		24 CITY-ST ZIP	Change Add-tion
CITY-ST-ZIP	Milwatti 1 E dad ta	DELETE	3 1 TITLE	Change Add-tion
			3.2 NAME	
NAME			3.3 STREET ADDRESS	
STREET ADDRESS			3.4 C+TY - S1 - ZIP	

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FT. LAUDERDALE FL 33015		14 CHY-S1-74	Change Addition
	DELETE	2.110bE	
		2.2 NAME	
18524 NW 67TH AVE., #159		2.3 STREET ADDRESS	
		24 CITY-ST ZIP	Change Addition
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DELETE	3 1 TITLE	Change Addition
		3.2 NAME	
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	EJ Del ETE		Change Addition
	Doctor		
			Change Addition
	DELEN		
		63 STHEFT ADDRESS	
		6.4 CITY - ST - ZIP	life for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further
	FT. LAUDERDALE FL 33015 VD HANNAN-ANTON, LAURIE ESQ 18524 NW 67TH AVE., #159 MIAMI FL 33015	VD HANNAN-ANTON, LAURIE ESQ 18524 NW 67TH AVE., #159 MIAMI FL 33015	VD HANNAN-ANTON, LAURIE ESO 18524 NW 67TH AVE., ₱159 MIAMI FL 33015 □ DELETE □ DEL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer of prector of the corporation or the receiver of trusted empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 12 or Block 13 if changed, or on final attachment with all address.

SIGNATURE:

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