FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1995 APR 27 AM 9 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000035717

1. Corporate Name

SARA'S OASIS, INC

Principal Place of Business: 2725-A HOLLYWOOD BLVD
HOLLYWOOD, FL. 33020

Mailing Address: SAME

100001146801 2
-04/28/95--01040--010
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 5/09/94

3a. Date of Last Report:

2. Principal Place of Business
21 SAME

2a. Mailing Address
26

4. FEI Number: 65-0490716 — Applied For / Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

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

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

City 24 | County 25 | City 29 | County 30

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GEORGE YAP
6113 S.W. 23RD STREET
MIRAMAR, FL. 33020

10. Name and Address of New Registered Agent

81 Name

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

83

84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 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. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [illegible]

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	PRESIDENT/DIRECTOR GEORGE YAP 6113 S.W. 23RD STREET, MIAMI
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	VICE-PRESIDENT SARA YAP 6113 S.W. 23RD ST. MIRAMAR.
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP	☐ Change ☐ Addition JCD 4-26

14. I hereby certify that the information supplied with this filing, and signature, is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: [illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/95

305-921-2559
Daytime Phone