

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000018636

1. Entity Name  
OASIS TEXTILES, INC.

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90008 039 \*\*\*550.00

Principal Place of Business  
1500 W CYPRESS CREEK RD.  
#408  
FT. LAUDERDALE FL 33309

Mailing Address  
1500 W CYPRESS CREEK RD.  
#408  
FT. LAUDERDALE FL 33309

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0561693

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AZIZ, OVAIS ABDUL  
8040 N. COLONY CIRCLE, BUILDING #2  
105  
TAMARAC FL 33321

Name AZIZ OVAIS ABDUL

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

8934 N.W 117<sup>th</sup> TER

City HIALEAH GARDEN FL Zip Code 33018

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME AZIZ, ABDUL  
STREET ADDRESS 8040 N COLONY CIRCLE #2-105  
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

TITLE P  
NAME AZIZ ABDUL PRESIDENT ☒ Change ☐ Addition  
STREET ADDRESS 1500 W. CYPRESS CREEK RD #408  
CITY-ST-ZIP FT LAUDERDALE, FL 33309

TITLE S  
NAME MARKATIA, MOHAMMAD  
STREET ADDRESS 1500 W CYPRESS CREEK RD., #402  
CITY-ST-ZIP FT. LAUDERDALE FL 33309 ☐ Delete

TITLE SECRETARY  
NAME MARKATIA MOHAMMAD ☒ Change ☐ Addition  
STREET ADDRESS 1500 W. CYPRESS CREEK RD #408  
CITY-ST-ZIP FL LAUDERDALE, FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)