

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000064735

1. Corporation Name OASIS GOURMET NATURAL FOOD, INC.

Principal Place of Business
976 41st Street
Miami Beach, FL 33140

Mailing Address
976 41st Street
Miami Beach, FL 33140

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida
August 2, 1996

5. FEI Number

65-0695014

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED []

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P&D	Sonia Lyn	3134 Sheridan Avenue	Miami Beach, Florida
S&T&D	Sam Hakman	3134 Sheridan Avenue	Miami Beach, Florida

8. Name and Address of Current Registered Agent

Marty Patrick
1141 Kane Concourse
Bay Harbor Islands, FL 33154

9. Name and Address of New Registered Agent

Name
Sonia Lyn
Street Address (P.O. Box Number is Not Acceptable)
976 41st Street
Suite, Apt. #, Etc.
City, State, Zip Code
Miami Beach FL 33140

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.050(5), F.S.

Signature of
Registered Agent

SONIA LYN

REGISTERED AGENT MUST SIGN

Date 4/06/99

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes [] No [X]

(See other side for information
on intangible tax.)

12. 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in Chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0491 or 617.0491, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/06/99

305-674-7676

Daytime Phone

CR2E040 (12/95)

20 April 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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Re: Oasis Gourmet Natural Food Inc.
976 41st Street
Miami Beach, Fl. 33140
Ref. No. P96000064735

Dear Sir/Madam:


I recently wrote to you to request this corporation be reinstated and my request was returned since I had incorrect information included therein, and the fee amount I sent was incorrect. When I received your correspondence, I called your office and received the correct information, therefore I am writing you again on this matter.

Per my telephone conversation with your office, I am enclosing a check for \$465.00 for filing fees and supplemental fees for the years 1997, 1998 and 1999.

In addition, I am asking that you please consider my request to waive the reinstatement fee. Since I became involved in February of this year in managing this corporation, it came to my attention that the annual requirements of your office had not been met since 1997. After checking around and not finding the documents required to be filed and these had not been received by the company from the registered agent, I called your office and got the blank form to fill out. We need to ensure that we meet your requirements and accordingly are attempting to do so. But as a small business trying to make ends meet, I ask that you please consider this request to waive the \$600. fee.

I appreciate very much your consideration in this matter.

Very truly,


Sonia Lyn