

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000064735

FILED
Jun 24, 2005
Secretary of State

Entity Name: OASIS GOURMET NATURAL FOOD INC.

Current Principal Place of Business:

976 41ST STREET
MIAMI BEACH, FL 33140

New Principal Place of Business:

3134 SHERIDAN AVE
MIAMI BEACH, FL 33140

Current Mailing Address:

976 41ST STREET
MIAMI BEACH, FL 33140

New Mailing Address:

3134 SHERIDAN AVE
MIAMI BEACH, FL 33140

FEI Number: 65-0695014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LYN, SONIA
976 41ST STREET
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

LYN, SONIA
3134 SHERIDAN AVE
MIAMI BEACH, FL 33140 US

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: SONIA LYN

06/24/2005

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: STD (X) Delete
Name: HAKMAN, SAM
Address: 3134 SHERIDAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33154

Title: PD () Delete
Name: LYN, SONIA
Address: 3134 SHERIDAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: LYN, SONIA
Address: 3134 SHERIDAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SONIA LYN

P

06/24/2005

Electronic Signature of Signing Officer or Director

Date