


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 12, 2004 8:00 am**  
**Secretary of State**

01-12-2004 90007 048 \*\*\*150.00

<b>DOCUMENT # P97000003970</b>					
1. Entity Name OASIS STAFFING, INC.					
Principal Place of Business 4400 N CONGRESS AVE., #250 WEST PALM BEACH, FL 33407			Mailing Address 4400 N CONGRESS AVE., #250 SUITE 100 WEST PALM BEACH, FL 33407		
2. Principal Place of Business		3. Mailing Address <i>same as above</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01072004 Chg-P CR2E034 (10/03)	
Zip		Country		4. FEI Number 65-0731520	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
OASIS OUTSOURCING ATTN: TERRY MAYOTTE 4400 NORTH CONGRESS AVENUE, SUITE 250 WEST PALM BEACH, FL 33407			Name <i>N/A</i>		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State <b>FL</b> Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>N/A</i> (NOTE: Registered Agent signature required when reinstating) DATE					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CEO	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KNEIP, ROBERT		NAME		
STREET ADDRESS	4400 N CONGRESS AVE., #250		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33407		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HANEMANN, CHARLES L		NAME		
STREET ADDRESS	1001 BRICKELL BAY DRIVE, 27TH FLOOR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
TITLE	DCEO	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KNEIP, ROBERT C		NAME		
STREET ADDRESS	4400 N CONGRESS AVE., #250		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33407		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MELVIN, STEPHEN		NAME		
STREET ADDRESS	4400 N CONGRESS AVE., #250		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33407		CITY-ST-ZIP		
TITLE	TDCO	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MAYOTTE, TERRY P		NAME		
STREET ADDRESS	4400 N CONGRESS AVE., #250		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH, FL 33407		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MNAYMNEH, SAMI W		NAME		
STREET ADDRESS	1001 BRICKELL BAY DRIVE, 27TH FLOOR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Terry Mayotte</i>		Date: 1-7-04		Daytime Phone #: 561-227-6500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Attachment  
#P9700003970  
44000867

**OWNERS AND OFFICERS**

Oasis Staffing, Inc.  
Federal Employer Identification Number: 650731520  
Date of Incorporation: 1/14/1997

Name	Title	Business Address
Terry P. Mayotte	Chief Financial Officer	4400 North Congress Avenue Suite 250
	Treasurer, and Director	West Palm Beach, Florida 33407
Rick Rosen	Vice President, Assistant Secretary and Director	1001 Brickell Bay Drive 27th Floor Miami, Florida 33131
Stephen M. Melvin	Secretary	4400 North Congress Avenue Suite 250 West Palm Beach, Florida 33407
Oasis Outsourcing Holdings, Inc.	Owner	4400 North Congress Avenue Suite 250 West Palm Beach, Florida 33407
Sami W. Mnaymneh	Director	1001 Brickell Bay Drive 27th Floor Miami, Florida 33131
Charles J. Hanemann	Director	1001 Brickell Bay Drive 27th Floor Miami, Florida 33131