# PROFIT CORPORATION ANNUAL REPORT 1999



### FLORIDA DEPARTMENT OF STATE

#### Katherine Härris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98000057622

OASIS BAR & GRILL, INC.

## FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90103 006 \*\*\*150.00



					E 1881/884 IZO FOTOT IBITA BBITA OBITA BBITA CRIST I CENO OZITA HOTO TIOT LODI		
Principal Place of Business Mailing Address							
10624 FRONT BEACH RD PANANA CITY BEACH FL 32407		10824 FRONT BEACH RD PANAMA CITY BEACH FL 32407			DO NOT WRITE IN THE	S SPACE	_
					3. Date Incorporated or Qualifed		<del>~~~</del>
				-	06/29/1998		
L		20 Mailing Address			4, FEI Number	An	olied For
<del></del> -	2. Principal Place of Business 2a. Mailing Address				59-3518256		Applicable
21 28 Suite Act # atc					19-5510200	\$8.75 A	
Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required		
City & State City & State					6. Election Campaign Financing		
23 28					Trust Fund Contribution Added to Fees		
Zip	ip Country Zip		Cou	intry	8. This corporation owes the current year for		(
24	25	29	30		Personal Property Tax.	[]Yes	□No
<del></del>	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	J Agent	
				81 Name			ļ
PATI	el, Bharti n		-	82 Street Add	ress (P.O. Box Number is Not Acceptable)		
10624 FRONT BEACH RD				DZ SUGGLAGO	1885 (F.O. DOX 11diliber is 110/ Acceptable)		
PANAMA CITY BEACH FL 32407				B3			
				84 City	F	85 Zip 0	ode
						<u> </u>	
office or in agent. I a	egistered asent, or both, is the State in familiar with, and according the other				constion submits this statement for the purpose on's board of directors. I hereby accept the appropriate the submits of the su	ointment as re	gisterect
Oldit tibita	Signature, typed or printed name of registered age			d Agent signature requir		ND DIRECTO	DC IN 12
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A	[] Change	Addition
TITLE .	PRESIDENT	☐ DELETE	1.1 T			( ) Augusta	
NAME	BHARTI PATEL		1.2 N	1			
STREET ADDRESS	10624 FRONT BCH	1 20	1.35	TREET ADDRESS			ļ
CTY-S1-ZIP	PANAMA GRUBCH.	PL, 32407	1.4 0	TTY-ST-ZIP			
TITLE		☐ DELETE	2.1 TI	mue		[] Change	☐ Addition
NAME			2.2 N	AME			
STREET ADDRESS	ļ		2.3 5	TREET ADDRESS			
				CITY-ST-ZIP			
CITY-ST-ZIP TITLE	<del></del>	☐ DELETE	3.11			[] Change	☐ Addition
		<u></u>	3.2 N				Į.
NAME				i			Ì
STREET ADDRESS	1			TREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	_	CITY-ST-ZIP		(☐ Change	Addition
TITLE	_	☐ DELETE	4.1 ∏			; *	
-NAMETT - T	· · · · · · · · · · · · · · · · ·			VAME -			
STREET ADDRESS	ļ			TREET ADDRESS		•	
CTTY-ST-ZIP				TTY-ST-ZIP		[ ] Change	Addition
TITLE		☐ DELETE	5.1 1			[] Chaille	
NAME	ļ		5.2 N		•	٠, ٠	ļ
STREET ADDRESS			5.3 5	TREET ADDRESS			İ
CITY-ST-ZIP	]		5.4 C	TTY-ST-ZIP			
TILE		☐ DELETE	6.1 T	ITLE .		[] Change	Addition
NAME !	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		62 N	IAME			
STREET ADDRESS		and the second	6.3 S	TREET ADDRESS			ſ
	fragilt one			2TY-ST-ZIP		,	1
CITY-SI-ZIP	1				Section 119 07(3VI) Florida Statutes, Lituriber c	ertify that the i	nformation

4. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under calk; that I am entificer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter (307, Florida Statutes; and that my name appears in (3)cock 12 or Block 13 if Chapter (307, Florida Statutes) with an address, with all other like empowered.

SIGNATURE:

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/01/99

Daytme Phone #