2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091439

Entity Name: OASIS HOME CARE INC.

FILED Jan 06, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

901 NORTHPOINT PARKWAY 1511 PROSPERITY FARMS RD

SUITE 115 STE 300

WEST PALM BEACH, FL 33407 US LAKE PARK, FL 33403 US

Current Mailing Address: New Mailing Address:

901 NORTHPOINT PARKWAY 1511 PROSPERITY FARMS RD SUITE 115 STE 300

WEST PALM BEACH, FL 33407 US LAKE PARK, FL 33403 US

FEI Number: 65-0878332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHRISTMAN-GRAVER, COLLEEN
901 NORTHPOINT PKWY
1511 PROSPERITY FARMS RD
115 STE 300

WEST PALM BEACH, FL 33407 US LAKE PARK, FL 33403 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: COLLEEN CHRISTMAN-GRAVER 01/06/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: CHRISTMAN-GRAVER, COLLEEN
Address: 1511 PROSPERITY FARMS RD, STE 300

City-St-Zip: LAKE PARK, FL 33403

I hereby 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 all other like empowered.

SIGNATURE: COLLEEN CHRISTMAN-GRAVER P 01/06/2011