


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2007 8:00 am
Secretary of State

08-20-2007 90054 008 ***550.00

DOCUMENT # F96000000889 1. Entity Name OASIS PUBLISHING, INC.			
Principal Place of Business 941 O ST., #800 LINCOLN, NE 68508		Mailing Address 220 ALHAMBRA CIRCLE 350 CORAL GABLES, FL 33134 US	
2. Principal Place of Business - No P.O. Box # 201 N. 8th Street		3. Mailing Address 9130 S. Dadeland Blvd.	
Suite, Apt. #, etc. Suite 300		Suite, Apt. #, etc. Suite 1209	
City & State Lincoln, NE		City & State Miami, FL	
Zip 68508	Country USA	Zip 33156	Country USA
4. FEI Number 47-0741646		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROJAS, JOSE I ESQ 225 ALHAMBRA CIRCLE SUITE 350 CORAL GABLES, FL 33134 (Address change only)		7. Name and Address of New Registered Agent Name Rejas, Jose I., Esq. Street Address (P.O. Box Number is Not Acceptable) 9130 S. Dadeland Blvd. Suite 1209 City Miami FL Zip Code 33156	
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 _____ (NOTE: Registered Agent signature required when remaining) DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		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 NAME STREET ADDRESS CITY-ST-ZIP	PDC ABRAHAMS, DAVID <input checked="" type="checkbox"/> Delete 941 O ST., #800 LINCOLN, NE 68508	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President - Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Qualsett, Richard 1 Hughes Center Dr., #1402 Las Vegas, NV 89169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SMITH, CRAIG <input type="checkbox"/> Delete 941 O ST., #800 LINCOLN, NE 68508	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President - Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Smith, Craig 5930 Norman Road Lincoln, NE 68512
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD QUALSETTE, DICK <input type="checkbox"/> Delete 941 O ST., #800 LINCOLN, NE 68508	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Heier, Richard 352 Lakeshore Dr. Lincoln, NE 68528
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Richard Qualsett (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)		Date: 8/17/07	Daytime Phone #: 702-290-9829