

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000003321

**FILED**  
**Sep 14, 2022**  
**Secretary of State**  
**6422787163CC**

**Entity Name:** OXFORD WORLD UNIVERSITY INC,

**Current Principal Place of Business:**

KRA 13 C 31 B 08 SURC  
13  
BOGOTA, CUNDINAMARCA 13 C 31 B 08

**Current Mailing Address:**

RUA MONTE GORDO  
BELA VISTA INCOOP 412  
CAMACARI BAHIA 406, BAHIA 42802500 BR

**FEI Number:** 92-0303283

**Certificate of Status Desired:** Yes

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

RODRIGUES, ANDRES SR,  
150 SE 2ND AVENUE 1110  
1110  
MIAMI, FL 33131 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GONZALEZ, OMAR ROJAS PHD,  
Address        KRA 13 C 31 B 08 SURC  
                  13  
City-State-Zip: BOGOTA CUNDINAMARCA 13 C 31 B  
                  08

Title            VICE PRESIDENT  
Name            PARDO PARDO, JAIDITH KIMERL  
                  PHD,  
Address        KRA 13 C 31 B 08 SURC  
City-State-Zip: BOGOTA CUNDINAMARCA 13 C 31 B  
                  08

Title            SEC  
Name            COHEN, ZIGMUND ZIEGLER PHD,  
Address        MOUNT ZION 14166  
                  ISRAEL  
City-State-Zip: JERUSALEM FL 911141

Title            INTERNATIONAL LAWYER  
                  REPRESENTATIVE AMERICAN BAR  
                  ASSOCIATION ID: 05668601.  
Name            COHEN, ROBERTO PHD  
Address        RUA MONTE GORDO  
                  BELA VISTA INOCOOP 412  
City-State-Zip: CAMAÇARI BAHIA BAHIA 42802500

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** OMAR ROJAS GONZALEZ

**PRESIDENT**

**09/14/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date