#### 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000014982

Entity Name: OXFORD BIOMEDICAL TECHNOLOGIES, INC.

FILED
Apr 28, 2015
Secretary of State
CC6889444669

### **Current Principal Place of Business:**

3555 FISCAL CT

8 & 9

RIVIERA BCH, FL 33404

#### **Current Mailing Address:**

3555 FISCAL CT

8 & 9

RIVIERA BCH, FL 33404 US

FEI Number: 65-0392284 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

HOFFMAN, MICHAEL F 3555 FISCAL CT 8 & 9

RIVIERA BEACH, FL 33404 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 PD	Title	CD
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NameHOFFMAN, MICHAEL FNameDAVIS, JERRY III AAddress13324 WHISPERING LAKES LANEAddress1208 SUNSET AVECity-State-Zip:PALM BEACH GARDENS FL 33418City-State-Zip:PERRY GA 31069

Title VTSD Title VD

NameSOUZA, ROBERT ANameDEMITCHELL, ETHAN JAddress355 ELLAMAR ROADAddress4540 PORTOFINO WAY

City-State-Zip: WEST PALM BEACH FL 33405 City-State-Zip: WEST PALM BEACH FL 33009

Title D Title DIRECTOR

NameDAVIS, JERRY IV ANameGOODMAN, PHILIPAddress2220 HWY 27, LOOP RD.Address3555 FISCAL CT

8 & 9

City-State-Zip: PERRY GA 31609 City-State-Zip: RIVIERA BCH FL 33404

Date

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.