

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 JUL 25 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **FD200000D2430**

1. Entity Name
Oxford Collection Agency, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
135 Maxess Road

Suite, Apt. #, etc.

3. Mailing Address
same

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Melville, NY 11747

City & State

Zip Country Zip Country

4. FEI Number
113389815

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City Tallahassee FL Zip Code 32301-2525

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 reinstating) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Patrick Pinto 135 Maxess Road Melville, NY 11747	TITLE NAME STREET ADDRESS CITY - ST - ZIP	400021792204 07/25/03--01075--001 **558.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Charles Harris 135 Maxess Road Melville, NY 11747	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary/Treasurer Peter Pinto 135 Maxess Road Melville, NY 11747	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Patrick Pinto 135 Maxess Road Melville, NY 11747	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	OFFICER/MANAGER CHRISTINE HARRIS 135 MAXESS RD. MELVILLE, NY 11747	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Christine Harris Date: July 11, 2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

27/28