

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L85110

1. Entity Name

OXFORD EDUCATIONAL SERVICES, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90117 030 ***158.75

Principal Place of Business

2455 E. SUNRISE BLVD
 PH-SOUTH
 FORT LAUDERDALE FL 33304

Mailing Address

2455 E. SUNRISE BLVD
 PH-SOUTH
 FORT LAUDERDALE FL 33304-3118

2. Principal Place of Business

11950 NW 39 ST

3. Mailing Address

SAME

Suite, Apt. #, etc.

SUITE D

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL.

City & State

4. FEI Number

65-0849420

Applied For

Not Applicable

Zip

33065

Country

USA

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURSON, E. N. III
 2455 E. SUNRISE BLVD
 PH-SOUTH
 FORT LAUDERDALE FL 33304

Name

~~ERNEST N. BURSON, III~~

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

11950 NW 39 ST

SUITE D

City

CORAL SPRINGS

FL

Zip Code

33065

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/00

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CPD
 NAME BURSON, E. N. III
 STREET ADDRESS 2455 E SUNRISE BLVD- PH-SOUTH
 CITY-ST-ZIP FORT LAUDERDALE FL 33304 ☐ Delete

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 2825 CORAL SHORES DR
 CITY-ST-ZIP FORT LAUDERDALE FL 33304

TITLE S
 NAME STRITKINS, JOY H
 STREET ADDRESS 2455 E SUNRISE BLVD- PH-SOUTH
 CITY-ST-ZIP FORT LAUDERDALE FL 33304 ☒ Delete

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00

Date

954-344-2454

Daytime Phone #

CR2E034 (9/99)