2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# P01000100598

Entity Name: OXEBRIDGE QUALITY RESOURCES, INC.

Current Principal Place of Business:

1025 W. LAKE HAMILTON DR.
WINTER HAVEN, FL 33881

New Principal Place of Business:

274 WEST CENTRAL AVENUE
SUITE G
WINTER HAVEN, FL 33880

Current Mailing Address:

1025 W. LAKE HAMILTON DR.
WINTER HAVEN, FL 33881

New Mailing Address:

274 WEST CENTRAL AVENUE
SUITE G
WINTER HAVEN, FL 33880

FEI Number: 65-1158207 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TURNER, MARK G
255 MAGNOLIA AVE., SW
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARIS, SUSAN J
Address: 1025 W. LAKE HAMILTON DR.
City-St-Zip: WINTER HAVEN, FL 33881

Title: D (X) Delete
Name: PARIS, CHRISTOPHER M
Address: 1025 W. LAKE HAMILTON DR.
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PARIS, CHRISTOPHER M
Address: 1025 W. LAKE HAMILTON DR.
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHER M. PARIS D 03/01/2009

Electronic Signature of Signing Officer or Director — Date