

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096119

FILED
Apr 27, 2009
Secretary of State

Entity Name: OXFORD DISTRIBUTORS & MARKETING, INC

Current Principal Place of Business:

1450 NW 87TH AVENUE
SUITE #210
DORAL, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

1450 NW 87TH AVENUE
SUITE #210
DORAL, FL 33172 US

New Mailing Address:

FEI Number: 26-3604712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNEZ, ALEJANDRO
1450 NW 87TH AVENUE
SUITE #210
DORAL, FL 33172 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: P,SD () Delete
Name: NUNEZ, ALEJANDRO
Address: 11400 SW 95TH AVENUE
City-St-Zip: MIAMI, FL 33176 US

Title: VP,D () Delete
Name: BENGOCHEA, JOSE A M.D.
Address: 280 RADA COURT
City-St-Zip: CORAL GABLES, FL 33143 US

Title: VP,D () Delete
Name: FRANCO, MARIA E M.D.
Address: 2451 BRICKELL AVENUE, APT. 8A
City-St-Zip: MIAMI, FL 33129 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ALEJANDRO NUNEZ

P, D

04/27/2009

Electronic Signature of Signing Officer or Director

Date