FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:



OXFORD CONSTRUCTION CORP.

FILED 03 AUG 29 PM 2: 56 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 8230 VINELAND OAKS 8220 VINELAND OAKS Suite, Apt. #. etc. Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE BLVD. BLVDI 4. FEI Number 58-2039578 Applied For City & State ORLANDO, FL City & State ORLANDO Not Applicable Country USA ^{Zio}32835 ^{Zio}32835 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name-DO NOT WRITE IN THIS SPACE CITYORLANDO 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 SIGNATURE January 1 - May 1 Fee is \$150.00 9. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. PRESIDENT CR2E034B (12/02) TITLE TITLE 600022661086 MATTHEW NAERT NAME NAME 08/29/03--01024--004 **1050.00 8220 VINELAND OAKS BLVO. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32835 VICE PRESIDENT RUDOCPH NAERT NAME NAME 8220 VINELAND OAK BLVD. STREET ADDRESS STREET ADDRESS ORLANDO, FL 32835 CITY-ST-ZIP CITY-ST-ZIP SECY- TREASURER TITLE TITLE ROBERT NAERT NAME NAME 8220 VINELAND OAKS BLVD STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP ORLANDO , FL 32835 CITY-ST-7IF TITLE DIRECTOR IN THIS SPACE MATTHEW NAERT NAME NAME STREET ADDRESS 8220 VINELAND CAKS BLUD. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP 32835 DIRECTOR TITLE TITLE POBERT NAERT NAME NAME BZZO VINELAND DAKS BLUD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, 32835 CITY-ST-7IP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP 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