## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P93000063424** 1. Entity Name THE OXFORD GROUP SOUTHEAST, INC. Mailing Address Principal Place of Business 21045 COMMERCIAL TRAIL 21045 COMMERCIAL TRAIL BOCA RATON FL 33486-1006 BOCA RATON FL 33486

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

Country

After MAY 1, 2000 Fee will be \$550.00

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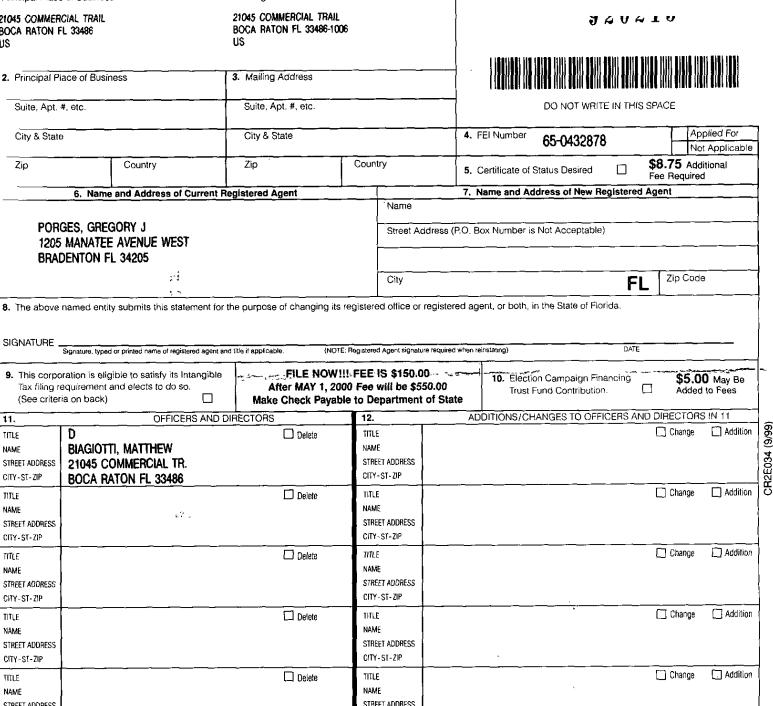
CITY-ST-ZIP

Name

City

## FILED Mar 13, 2000 8:00 am Secretary of State

03-13-2000 90067 038 \*\*\*150.00



CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

STREET ADORESS

SIGNATURE:

2. Principal Place of Business

PORGES, GREGORY J

1205 MANATEE AVENUE WEST **BRADENTON FL 34205** 

9. This corporation is eligible to satisfy its Intangible

**BIAGIOTTI, MATTHEW** 

21045 COMMERCIAL TR.

**BOCA RATON FL 33486** 

Tax filing requirement and elects to do so.

(See criteria on back)

D

Country

6. Name and Address of Current Registered Agent

: 1

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

OFFICERS AND DIRECTORS

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

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WING OFFICER OR DIRECTOR Date Daytime Phone # SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Addition