

FILED
May 23, 2001 8:00 am
Secretary of State

04-30-2001 90036 027 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000003321

1. Entity Name

OXFORD ACCEPTANCE COMPANY

Principal Place of Business

10701 SW 104 ST
MIAMI FL 33176

Mailing Address

10701 SW 104 ST
MIAMI FL 33176

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0804239**

Applicable For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

O'DONALD, BURTON T
10701 SW 104 ST
MIAMI FL 33176

7. Name and Address of New Registered Agent

Name **CORWIN, ARTHUR**
Street Address (P.O. Box Number is Not Acceptable)
10701 SW 104 ST
City **MIAMI** Zip Code **33176**

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

Art Corwin

Pres

14 May 2001

Signature typed or in blue ink of officer, director, or authorized agent

NOTE: Required when changing registered office or registered agent

DATE

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, 2001 Fee will be \$650.00
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	STO O'DONALD, BURTON T 10021 S.W. 142 STREET MIAMI FL 33176	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COHEN, SANFORD 3705 S.W. 133 COURT MIAMI FL 33186	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORWIN, ARTHUR 5 POWDER HILL PLACE DURHAM NC 27707	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MR CORWIN, ARTHUR 5 POWDER HILL PLACE DURHAM, NC 27707	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CORWIN, CRIS 5 POWDER HILL PLACE DURHAM, NC 27707	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 19.07(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 or changed or on an attachment with an address, with all other the employees.

SIGNATURE:

Art Corwin
Signature typed or in blue ink of officer, director, or authorized agent

4/14/01 (305) 595-5942
Date

CFR26034 (10-00)