

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40014

FILED  
Jul 02, 2005  
Secretary of State

Entity Name: OXFORD MAISON CORPORATION

**Current Principal Place of Business:**

809 N DIXIE HWY  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

809 N DIXIE HWY  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

809 N DIXIE HWY  
FRNT  
WEST PALM BEACH, FL 33401 US

FEI Number: 65-0268047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FERNANDES, OTTONI C.  
1541 SUNSET DRIVE, STE 203  
CORAL GABLES, FL 33143 US

**Name and Address of New Registered Agent:**

FERNANDES, OTTONI C.  
7500 RED ROAD  
SOUTH MIAMI, FL 33143 US

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:

07/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MAISON, RAYMOND MARC, EL  
Address: 222 CHERRY LANE  
City-St-Zip: PALM BEACH, FL 33480

Title: DVS ( ) Delete  
Name: MAISON, JOYCE F.  
Address: 222 CHERRY LANE  
City-St-Zip: PALM BCH, FL 33480

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: JOYCE MAISON

MRS

07/02/2005

Electronic Signature of Signing Officer or Director

Date