2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40014

Entity Name: OXFORD MAISON CORPORATION

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

809 N DIXIE HWY 905 N RAILROAD AVE R

FRNT

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

809 N DIXIE HWY 905 N RAILROAD AVE

FRNT

WEST PALM BEACH, FL 33401 US 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: Name and Address of New Registered Agent:

FERNANDES, OTTONI C. FERNANDES, OTTONI C 7440 S.W. 50TH TER, STE 109 7500 RED ROAD

SOUTH MIAMI, FL 33143 US MIAMI, FL 33155

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: OTTONI C. FERNANDES 03/20/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: () Delete Title: (X) Change () Addition MAISON, RAYMOND M MAISON, RAYMOND M Name: Name: 222 CHERRY LANE 5200 FLAGLER APT 2502 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: WEST PALM BEACH, FL 33407

Title: DVS Title: DVS (X) Change () Addition () Delete

Name: MAISON, JOYCE F Name: MAISON, JOYCE F 222 CHERRY LANE 5200 FLAGLER APT 2502 Address: Address: PALM BCH, FL 33480 WEST PALM BCH, FL 33407 City-St-Zip: 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: JOYCE F MAISON DVS 03/20/2009