

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000470

FILED
Jan 22, 2009
Secretary of State

Entity Name: ONWARD TECHNOLOGIES, INC.

Current Principal Place of Business:

9525 BRYN MAWR AVE
755
ROSEMONT, IL 60018

New Principal Place of Business:

Current Mailing Address:

9525 BRYN MAWR AVE
755
ROSEMONT, IL 60018

New Mailing Address:

FEI Number: 94-3261978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: MEHTA, HARISH
Address: 9525 BRYN MAWR AVE, STE 755
City-St-Zip: ROSEMONT, IL 60018

Title: TD () Delete
Name: KALE, HITENDRA
Address: 9525 BRYN MAWR AVE, STE 755
City-St-Zip: ROSEMONT, IL 60018

Title: D () Delete
Name: MEHTA, S H
Address: 9525 BRYN MAWR AVE, STE 755
City-St-Zip: ROSEMONT, IL 60018

Title: SEC () Delete
Name: BARBOJ, GODFREY
Address: 9525 BRYN MAWR AVE, STE 755
City-St-Zip: ROSEMONT, IL 60018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: GODFREY BARBOJ

SEC

01/22/2009

Electronic Signature of Signing Officer or Director

_____ Date