SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 16, 1999 8:00 am
Secretary of State
09-16-1999 90014 002 ***550.00

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DOCUMENT # F97000002585

1. Corporation Name

AXIS INTEGRATED RESOURCES, INC.

Principal Place of Business	Mailing Address
505 14TH ST SUITE 1110 OAKLAND CA 94612 US	11171 SUN CENTER DR LEGAL DEPARTMENT RANCHO CORDOVA CA 95670 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/15/1997

2. Principal Place of Business 21	2a. Mailing Address 26 3400 Data Drive, 3E	4. FEI Number **94-3037822**	Applied For / Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24	Country 25	Zip 28	Country 30	8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

CR2E034 (5/99)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE **D** ☒ DELETE NAME **KAMRATH, ROBERT A** STREET ADDRESS **11171 SUN CENTER DR** CITY-ST-ZIP **RANCHO CORDOVA CA 95670**		1.1 TITLE **D/P** 1.2 NAME **Robert P. White** 1.3 STREET ADDRESS **3400 Data Drive, 3E** 1.4 CITY-ST-ZIP **Rancho Cordova, CA 95670**	☐ Change ☒ Addition
TITLE **D** ☐ DELETE NAME **SEIBEL, RONALD E** STREET ADDRESS **153 TECHNOLOGY DRIVE** CITY-ST-ZIP **IRVINE CA 92618**		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **S** ☒ DELETE NAME **NIENOW, TRECIA M** STREET ADDRESS **11171 SUN CENTER DRIVE** CITY-ST-ZIP **RANCHO CORDOVA CA 95670**		3.1 TITLE **S** 3.2 NAME **B. Curtis Westen, Jr.** 3.3 STREET ADDRESS **21650 Oxnard Street** 3.4 CITY-ST-ZIP **Woodland Hills, CA 91367**	☐ Change ☒ Addition
TITLE **DCOB** ☐ DELETE NAME **COSTA, MAURICE A CEO** STREET ADDRESS **11171 SUN CENTER DRIVE** CITY-ST-ZIP **RANCHO CORDOVA CA 95670**		4.1 TITLE **D/COB/CEO** 4.2 NAME 4.3 STREET ADDRESS **3400 Data Drive, 3E** 4.4 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE **VPO** ☐ DELETE NAME **FOSTER, NICOLE** STREET ADDRESS **505 14TH STREET, SUITE 1110** CITY-ST-ZIP **OAKLAND CA 94612**		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **VPFT** ☐ DELETE NAME **SMITH, STEPHEN C** STREET ADDRESS **390 NORTH WIGET LANE** CITY-ST-ZIP **WALNUT CREEK CA 94598**		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Robert P. White, President

SIGNATURE: _____   9/10/99   (916) 631-6114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #