2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# P03000111453

Entity Name: ONYX LENDING SOLUTIONS, INC.

Current Principal Place of Business:

3516 EAST POINTE PLACE
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

11929 NORTHWEST 54 PLACE
CORAL SPRINGS, FL 33076 US

Current Mailing Address:

3516 EAST POINTE PLACE
COCONUT CREEK, FL 33073 US

New Mailing Address:

11929 NORTHWEST 54 PLACE
CORAL SPRINGS, FL 33076 US

FEI Number: 20-0369963 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALICEA, ROBERT
3516 EAST POINTE PLACE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

ALICEA, ROBERT
11929 NORTHWEST 54 PLACE
CORAL SPRINGS, FL 33076 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: _____ 04/30/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALICEA, ROBERT
Address: 3516 EAST POINTE PLACE
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: VP ( ) Delete
Name: ALICEA, CRISTINA
Address: 3516 EAST POINTE PLACE
City-St-Zip: COCONUT CREEK, FL 33073 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALICEA, ROBERT
Address: 11929 NORTHWEST 54 PLACE
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: VP (X) Change ( ) Addition
Name: ALICEA, CRISTINA
Address: 11929 NORTHWEST 54 PLACE
City-St-Zip: CORAL SPRINGS, FL 33076 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT ALICEA P 04/30/2006
Electronic Signature of Signing Officer or Director — Date