

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000038956

Entity Name: 2205 ONYX CORP

FILED
Jul 03, 2006
Secretary of State

Current Principal Place of Business:

7029 FRANCISCO BEND DRIVE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

7029 FRANCISCO BEND DRIVE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 20-2477338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRSCH AND COMPANY CPAS INC
175 W CAMINO REAL
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

JOEL LEVY ASSOCIATES
2101 CORPORATE BLVD NW
SUITE 317
BOCA RATON, FL 33431 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: JOEL LEVY

07/03/2006

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: P () Delete
Name: GORRIN, LILLIAN
Address: 7029 FRANCISCO BEND DRIVE
City-St-Zip: DELRAY BEACH, FL 33446

Title: VP () Delete
Name: EISNER, PHYLLIS
Address: 12603 VIA LUCIA
City-St-Zip: BOYNTON BEACH, FL 33446

Title: VP () Delete
Name: FRIEDMAN, MELVIN
Address: 6121 POINTE REGAL CIR #305
City-St-Zip: DELRAY BEACH, FL 33484

Title: V () Delete
Name: MADDURI, RAMACHANDRA R
Address: 14 CACTUS CT
City-St-Zip: EDISON, NJ 08820

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: P () Change (X) Addition
Name: GORRIN, LILLIAN
Address: 7029 FRANCISCO BEND DR
City-St-Zip: DELRAY BEACH, FL 33446 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: LILLIAN GORRIN

P

07/03/2006

Electronic Signature of Signing Officer or Director

Date