FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

	DOCUMENT	#	P1	33	14
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1. Corporation Name

ELEXIS CORPORATION

FILED Jun 10, 1999 8:00 am Secretary of State

06-10-1999 90023 048 ***550.00



Principal Place of Business	Mailing Address					
7000 N.W. 46 STREET 7000 N.W. 46 STREET MIAMI FL 33166 MIAMI FL 33166				DO NOT WRITE IN T	HIS SPACE	
				3. Date Incorporated or Qualifed		
				02/18/1987		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
 -	26			59-2010707	No	t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22	27			5. Certifcate of Status Desired	Fee Re	quired
City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23	28		_	Trust Fund Contribution	Added t	o Fees
Zip Country	Zip	Count	try	8. This corporation owes the current year		_
24 25	29 30	0		Personal Property Tax.	Yes	□No
	Current Registered Agent			10. Name and Address of New Registe	red Agent	
		8	Name			
BIANCO, FRANK J.		5	32 Street Addr	ress (P.O. Box Number is Not Acceptable)		
7000 N.W. 46 STREET						
MIAMI FL 33166		8	13			
		-	Oit.		85 Zip (Code
			City	i	FL S Z Z S	7006
agent. I am familiar with, and accept the SIGNATURE Signature, typed or printed name of regis	e obligations of, Section 607.0505, Florid- stered agent and title if applicable. (NOTE: Re		es. gent signature require			
12. OFFICE	ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE COB	☐ DELETE	1.1 TITL	⊧ (C	00 57	Change	Addition
NAME BIANCO, FRANK J.		1.2 NAM	IE.			
STREET ADDRESS 7000 N.W. 46 STREET		1.3 STR	EET ADDRESS			
CITY-ST-ZIP MIAMI FL 33166		1.4 CITY	-ST-ZIP			
TITLE ST	ĐELETE	2.1 TITL:	E		☐ Change	Addition
NAME - RYAN, MICHAEL -		2.2 NAM	IE .			
STREET ADDRESS -7000 N.W. 48 STREET		2.3 STR	EET ADDRESS			
CITY-ST-ZIP -MIAMI FL 33168	<u> </u>	2. 4 CIT	Y-ST-ZIP			
TITLE D	☐ DELETE	3.1 TITL	E		Change	☐ Addition
NAME STONE, RONALD		32 NAW	IE			
STREET ADDRESS 7000 N.W. 46 STREET		3.3 STR	EET ADDRESS			
CITY-ST-ZIP MIAMI FL 33166		3.4. CIT	Y-ST-ZIP			[m] 1 1 100°
TITLE	☐ DELETE	4 1 TITL	E		☐ Change	Addition
NAME		4. 2 NA	#E			
STREET ADDRESS		4.3 STR	EET ADDRESS			
CITY-ST-ZIP			/-ST-ZIP			
TITLE	☐ DELETE	5.1 TITL			Change	☐ Addition
NAME		5.2 NAM	j			
STREET ADDRESS		1	EET ADDRESS			
CITY-ST-ZIP			/-ST-ZIP			
TITLE	☐ DELETE	6,1 TITL			☐ Change	☐ Addition
NAME		6.2 NAM				
STREET ADDRESS		6,3 STR	EET ADORESS			
CITY-ST-ZIP		6.4 CITY	(-ST-ZIP			

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 changes on an address, with all other like empowered.

SIGNATURE