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

PROFIT CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000053030 (8)

## FILED Mar 23 1998 8:00am Secretary of State

ONYX	HOLDINGS, INC.	, ,				
Principal Plac	e of Business	Mailing Address				(11)
730 W MCNAB ROAD 730 W MCNAB ROAD FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309			)9			
		1			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 06/21/1996	
2. Principal Place of Business 2a. Mailing Ad					4. FEI Number Applied	For
21		26	the Arch III at		<b>65-0678534</b> Not Appl	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Section Fee Required	
City & Stat	Θ	City & State	•		Election Campaign Financing \$5.00 May B	
23		28			Trust Fund Contribution Added to Fee	
Zip	Zip Country Zip				8. This corporation owes or has paid the current year Intangible	le
24	25		30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent	
	ADY, GERALD J		81	Name		
730 W MCNAB ROAD			82	Street	Address (P.O. Box Number is Not Acceptable)	
FT FT	LAUDERDALE FL 33309				<u> </u>	
			63			
			84	City	85 Zip Code	
44 5	4.4	0 - 1 007 1500 El 11 Ou			PL	
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.						
agent. I a	im familiar with, and accept the oblig	ations of, Section 607.0505, Flo	rida Statutes	i	, , , , ,	}
SIGNATURE	Signature, typed or printed name of registered egr					
12,	OFFICERS AN		13.	nt signeture	e required when reinslating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	·
TITLE	D DELETE				F-1 04	Addition
NAME	ELLMAN, J. LEON		1.2 NAME		DIRECTOR/FRESIDENT	
STREET ADDRESS	S 730 W MCNAB ROAD		1.3 STREET ADDRESS		J. Leon Ellman 730 W. McNab Road	
CITY-ST-ZIP	FT LAUDERDALE FL 33309		1.4 CITY-ST-ZIP		Ft. Lauderdale, FL 33309	
TITLE	ST DELETÉ		2.1 TITLE			\odition
NAME	GERALD J. BRADY		2.2 NAME		-	
STREET ADDRESS	730 W. MCNAB ROAD		23 STREET	ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		2 4 CiTY-S	1- ZIP		
TITLE	☐ DELETE		3.1 TITLE		☐ Change ☐ A	Addition
NAME			3.2 NAME			
STREET ADDRESS	s		3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE	☐ DELETE		4.1 TITLE		☐ Change ☐ A	Addition
NAME			4. 2 NAME			
STREET ADDRESS	RESS		4.3 STREET	ADDRESS	,	
CITY-ST-ZIP			4.4 CITY - S1	r- ZIP	<u> </u>	
TITLE	DELETE 5		5.1 TITLE		☐ Cpange ☐ A	vddition
NAME			5.2 NAME	,	<i>1</i> ん み	
STREET ADORESS	1		5.3 STREET	i	411425	
CITY-ST-ZIP		T	5.4 CITY-SI	-ZIP	/ / /	
TITLE	☐ DELETE		6.1 TITLE		000002466126°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°	ddition
NAME			6.2 NAME		-03/24/9801023007	j
STREET ADDRESS		6.3 STREET		***150.00	- 1	
CITY-ST-ZIP			6.4 CITY - ST	- 21P	The second second	

14. Thereby 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 changid, or this production with an address.

MATURE WESLEY

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