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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 03 1998 8:00am Secretary of State

DOCUMENT # P96000073338 (1) ONYX TECHNOLOGY, INC. Principal Place of Business Mailing Address 7811 27TH AVENUE WEST 7811 27TH AVENUE WEST **BRADENTON FL 34209 BRADENTON FL 34209** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>08/29/1996</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0690633 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Country This corporation owes or has paid the current year Intangible X Yes 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BELL, BROOKS J 7811 27TH AVENUE WEST 82 Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34209** 83 City 84 Zip Code 85 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 registried agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME BELL, BROOKS J 1.2 NAME CR2E034 STREET ADDRESS 7811 27TH AVENUE WEST 1.3 STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition Change TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE TATLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 5.4 CITY-ST-ZIP Change Addition TITLE DELETE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY - ST - ZIP

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 changed, or on an attachment with an address.

SIGNATURE: