

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000091343

Entity Name: ONELOGIC, INC.**Current Principal Place of Business:**4850 T-REX AVENUE
SUITE 125
BOCA RATON, FL 33431**Current Mailing Address:**4850 T-REX AVENUE
SUITE 125
BOCA RATON, FL 33431 US**FEI Number:** 47-5570167**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE LAW OFFICES OF JEFF COHEN, P.A.
151 NW 1ST AVENUE
DELRAY BEACH, FL 33444 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SAVAGE, PATRICK
Address 4850 T-REX AVENUE
SUITE 125
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name CASEY, RICHARD
Address 4850 T-REX AVENUE
SUITE 125
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name CASEY, WILLIAM
Address 4850 T-REX AVENUE
SUITE 125
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name SAVAGE, MAXINE
Address 4850 T-REX AVENUE
SUITE 125
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY, CFO, OFFICER
Name CORNETT, WILLIAM JOSEPH
Address 4850 T-REX AVENUE
SUITE 125
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT, CEO, DIRECTOR,
OFFICER
Name DAVID, BENJAMIN
Address 4850 T-REX AVE.
SUITE 125
City-State-Zip: BOCA RATON FL 33431

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM JOSEPH CORNETT**CFO****02/19/2021**

Electronic Signature of Signing Officer/Director Detail

Date