2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0600000318

Entity Name: ONYX PHARMACEUTICALS, INC.

Current Principal Place of Business:

ONE AMGEN CENTER DRIVE THOUSAND OAKS, CA 91320-1799

Current Mailing Address:

ONE AMGEN CENTER DRIVE

THOUSAND OAKS. CA 91320-1799 US

FEI Number: 94-3154463 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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 PRESIDENT, DIRECTOR Title DIRECTOR

Name HARPER, SEAN E Name HOOPER, ANTHONY C.

Address ONE AMGEN CENTER DRIVE Address ONE AMGEN CENTER DRIVE

City-State-Zip: THOUSAND OAKS CA 91320-1799 City-State-Zip: THOUSAND OAKS CA 91320-1799

Title DIRECTOR Title SECRETARY

Name MELINE, DAVID W Name GRAHAM, JONATHAN P

Address ONE AMGEN CENTER DRIVE Address ONE AMGEN CENTER DRIVE

City-State-Zip: THOUSAND OAKS CA 91320-1799 City-State-Zip: THOUSAND OAKS CA 91320-1799

Title TREASURER

Name LEHMANN, MARY A.

Address ONE AMGEN CENTER DRIVE

City-State-Zip: THOUSAND OAKS CA 91320-1799

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: JONATHAN GRAHAM S

Electronic Signature of Signing Officer/Director Detail

SECRETARY 04/21/2017

FILED Apr 21, 2017

Secretary of State

CC1333816798

Date