

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 DEC 10 PM 12:45

1. Name of Limited Partnership
EcoLinks, Ltd.

1a. DOCUMENT #
A97000002284

Mailing Address
601 Bayshore Boulevard
Suite 960
Tampa, Florida 33606

Principal Office Address
601 Bayshore Boulevard
Suite 960
Tampa, Florida 33606

3. Date Formed or Registered
10/22/97

5a. Capital Contributions as
Shown on record
\$445,500.00

3a. Date of Last Report
N/A

5b. Amount of Capital
Contributions in FLORIDA
to date:
\$445,500.00

4. State or Country of Formation
Florida

6. FEI Number
59-3478858 ☒ Applied For
☐ Not Applicable

7. Certificate of Status Desired ☐ \$8.75 Add-on
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address
601 Bayshore Boulevard
Suite, Apt. #, etc.
Suite 960
City & State
Tampa, Florida
Zip Country
33606 U.S.A.

2a. Principal Office Address
601 Bayshore Boulevard
Suite, Apt. #, etc.
Suite 960
City & State
Tampa, Florida
Zip Country
33606 U.S.A.

9. Name and Address of Current Registered Agent

Edward R. Oelschlaeger
601 Bayshore Boulevard
Suite 960
Tampa, Florida 33606

10. If changed, new Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City FL Zip Code

10a. Pursuant to the provisions of sections 620.1061 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)
Ecoventure Links, Inc.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)
601 Bayshore Boulevard,
Suite 960

11b. City, State & Zip Code
Tampa, Florida 33606

11c. Registration/
Document Number
P94000085461

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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE

DATE 11/10/97

Typed or Printed Name of General Partner Signing Form

Edward R. Oelschlaeger, President of General Partner
Daytime Telephone Number 813-251-4868

CR2E003 (6/97)