

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

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000002151 (5)
 1. Corporation Name
BEACON TRADEPORT GENPAR, INC.



Principal Place of Business 1999 AVENUE OF THE STARS, STE 1200 LOS ANGELES CA 90067	Mailing Address 1999 AVENUE OF THE STARS, STE 1200 LOS ANGELES CA 90067
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/23/1997	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number APPLIED FOR 52-2033079	Applied For Not Applicable
23. Zip	25. Country	28. Zip	29. Country	6. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			
				FL			

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRACK JR, THOMAS J	1.2 NAME	
STREET ADDRESS	1999 AVENUE OF THE STARS, STE 1200	1.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, KELVIN L	2.2 NAME	
STREET ADDRESS	1999 AVENUE OF THE STARS, STE 1200	2.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CODINA, ARMANDO	3.2 NAME	
STREET ADDRESS	2 ALHAMBRA PLAZA, PH-2	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWERDLOW, MICHAEL J	4.2 NAME	
STREET ADDRESS	200 S PARK ROAD, STE 200	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KESTIN, LAWRENCE A	5.2 NAME	
STREET ADDRESS	1999 AVENUE OF THE STARS, STE 1200	5.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	5.4 CITY-ST-ZIP	
TITLE	VT	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEDSTROM, MARK M	6.2 NAME	
STREET ADDRESS	1999 AVENUE OF THE STARS, STE 1200	6.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	6.4 CITY-ST-ZIP	

14. I hereby 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 to this address:

SIGNATURE: *Mark M. Hedstrom* **mark M. Hedstrom VP 2-17-98 310.282-8820**

CR2E034 (10/97)