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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

, , , ,	1998		DIVISION OF CORPORATIONS			Secretary of State				
1. Corporation	MENT # L2 ECO I, INC.	20132	(1)							
Principal Place	e of Business	Me	ailing Address				{		i Uluit Billit Uli	/II
% CAMPBELL CAPITAL MGMT 9400 SO DADELAND BLVD. STE 111 MIAMI FL 33156			% CAMPBELL CAPITAL MGMT 9400 SO DADELAND BLVD. STE 111 MIAMI FL 33156 US			DO NOT WRITE	IN THIS	SPACE		
US		U	•				3. Date incorporated or Qualified 10/02/1989			
2. Principal P	lace of Business	26.	Mailing Address				4. FEI Number		T IA	pplied For
21		26					65-0145702			ot Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		7 +	Additional equired
City & State	ė	28	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	29	Zip	Cour	ntry		B. This corporation owes or has pa Personal Property Tax due June			itangible
	9, Name and Addre	ss of Current Regist	ered Agent				10. Name and Address of New Re	gistered	Agent	
	M <mark>pbell</mark> , Karell XX S O Dadeland Bl	٧n		Į	81 Name		ss (P.O. Box Number is Not Acceptat	na)		
ST	E 111	.,,,		L	83	Addre	ss (F.O. Box 140/11ber is 140/ Acceptar			
MLA	AMI FL 33156				84 City				85 Zip	Code
					City			FL	, 193 210	Code
11. Pursuant to office or reagent. Lai	lo the provisions of Sect egistered agent, or both m fa miliar with, and acco	ions 607.0502 and 60 , in the State of Florid ept the obligations of	07.1508, Flori da Stat u la. Such change was , Section 607. 0505, F	ites, the ab authorized lorida Statu	ove-name by the co ites.	d corpo irporatio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of at the app	changing i ointment as	ts registered : registered
	Signature typed or printed name				Agent signatu	re required	(when reinstaling)	DATE		
12.	DP OI	FICERS AND DIREC	TORS DELETE	13.		· [ADDITIONS/CHANGES TO OFFIC	ERS AND	DIHECTOR Change	RS IN 12
TITLE NAME	CAMPBELL, KARE	11.14	O DETEIE	1.1 TfT 1.2 NAI		1			L. Grange	L_j Addition
STREET ADDRESS	8761 S.W. 85TH T				nl Eet address					
CITY+ST-ZIP	MIAMI FL				Y-S1-ZIP					
TITLE	1		DELETE	2.1 TIT		1			Change	Addition
NAME	CAMPBELL, CLAY	G.		2.2 NA	A E					
STREET ADDRESS	9400 SO DADELA	ND BLVD, STE 111		2.3 STF	EET ADDRESS	:	÷.	1.4.2		
CITY ST-ZIP	MIAMI FL				Y-ST-ZIP	↓				
TITLE	VP	,	☐ DELETE	3.1 TITI					☐ Change	☐ Addition
NAME	MASSERMAN, JAY 5774 SW 76 TERF			3.2 NAI		1				
STREET ADDRESS	MIAMI FL			E	EET ADDRESS					
CITY-ST-ZIP TITLE	MIVIMIT		DELETE	4.1 TITI	Y-ST-ZIP E	+			Change	Addition
NAME				4. 2 NA		1				
STREET ADDRESS				ı	EET ADDRESS					
CITY-ST-ZIP				4.4 CIT	Y-\$T-ZIP					
TITLE			☐ DELETE	5.1 T(T)	.E				Change	Addition
NAME				5.2 NAM						
STREET ADDRESS					eet address					
CITY-ST-ZIP			DELETE		Y-ST-ZIP	 			Change	Addition
TITLE			ש אנונונ	6.1 TITU 6.2 NAM		1			☐ Change	Addition
NAME STREET ADDRESS				6.2 NAM	ae Eet address					
AUDICEL MIDDRESS				0.3 3 M	ECT NUMESS	1				}

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 with an address.

CICMATIDE.

FILED

Feb 19 1998 8:00am