


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILED 98 JUL 15 PM 2:05 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company MEDIACOM, L.C. 185 NE 21ST STREET BOCA RATON FL 33431		DOCUMENT # L97000000641	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified 06/11/1997		3a. State of Formation FL <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
4. FEE Number		5. Date of Last Report	
6. Certificate of Status Desired \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent MIZEJEWSKI, STEVEN 185 NE 21ST STREET BOCA RATON FL 33431		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE _____ <small>(If a registered agent, a certificate of appointment is required. Registered Agent signature is required when reappointing.)</small>		DATE _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	JONES, RONALD KIPLING	803 GAILLARD DR	TUSKEGEE AL
MGRM	FARNES, JAMES	621 NE 23RD CT	POMPANO BEACH FL
MGRM	FARNES, ILONA	621 NE 23RD CT	POMPANO BEACH FL
MGRM	MIZEJEWSKI, STEVEN	185 NE 21ST STREET	BOCA RATON FL
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I, I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

James B. Farnes

SIGNATURE AND TITLE OF REGISTERED AGENT OR SIGNING MANAGER MEMBER OR MANAGER

Date

Signature of Member