File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 APR -9 AM 8: 14 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Jk uli3 Name and Malling Address of Limited Liability Company **DOCUMENT #** M97000000822 1a. Principal Place of Business Address TELAMCO LLC 104 CRANDON BLVD., SUITE 324 104 GRANDON BLVD., MIAMI FL 33149 MIAMI FL 33149 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 2601 So. BAYSHORE De. 2601 So. BAYSHORE DR. Suite, Apt. #, etc. Suite, Apt. #, etc. DE STE. 300-B City & State Applied For STP. 300-B 52-20600 30 City & State Not Applicable APPLIED FOR 5. Date of Last Report M'AM Mi Apri 6. Certificate of Status Desired Country \$8.75 Additional Fee Required USA 331 33 USA 33133 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name CORPORATION SERVICE , COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Suite, Apt. #, etc. City 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 _ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR BEECK, RODOLFO 104 CRANDON BLVD., SUITE 3 MIAMI FL 70**0**002488747---6 -04/14/98--01097--019 ****188.75 ****188.75 11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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 trusted 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: