2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2008
Secretary of State

DOCUMENT# P99000029728

Entity Name: ECL, INC.

Current Principal Place of Business:

THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE #2950
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE #2950
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0925879 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSE, ELLEN M ESQ.
THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE #2950
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROSE, CHARLOTTE
Address: ONE QUAYSIDE BLVD. #1611
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete
Name: ROSE, ELLEN
Address: 4000 TOWER SIDE TERRACE #1205
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete
Name: BAZARSKY, CAROL
Address: 59 KAY BOULEVARD
City-St-Zip: NEWPORT, RI 02840

Title: D ( ) Delete
Name: ROSE, LEO III
Address: 4845 WOODVALE DRIVE
City-St-Zip: ATLANTA, GA 30327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLOTTE ROSE D 02/21/2008

Electronic Signature of Signing Officer or Director — Date