PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORAT ISTATEM			7	TMENT OF STA		FILI	ED AH 9:39	
1. Corpor	UMENT ration Name 'UM, INC		09433	and the second s	and the second s			of State E. Florida	
1306 Stanford Drive 1 Suite, Apt. #, etc. Suite, Apt. #, etc. PO Box 248146 PO Box 248146 City & State Coral Gables, FL Coral Gables, FL Zip Country Zip				1306 Stanford Suite, Apt. #, etc. PO Box 24814 City & State	PO Box 248146 ity & State Coral Gables, FL		##122.50 Cartificate of Status Desired Status Desire		
	Name		, Lourdes		Address of Current Re	gistered Agent			
Signature o Registered	g appointed the of Agent	ral Ga	d agent of the ab	ove named corporation, am	SIGN	the obligations of secti	State FL ion 607.05		
Titles	s Name of Officers and/or Directors							City / State / Zip	
7)	Augustin, Cynthia			1122 K	1122 RMSB- Aus Med Si Bldg			Miami, FL 3313C	
D	Whitely, Patricia A			1252	1252 Hemorial Driver Romany			Coral Galdes, FL 33/24	
D	Dubord, Robert J.			છાં.	Street Address of Each Officer and/or Director 1122 KM SB- AGS Med Sc Bldg 1252 Hemorial Drive, linour BII Dichinson Drive			Coral Gables, FL 33146	
10. I certify									

Daytime Phone #



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September 25, 2003

Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

Robert DuBord 1306 Stanford Drive P.O Box 248146 Coral gables, FL 33124-8146

To: Whom It May Concern

This letter is pertaining to the WVUM's incorporation fee and application. As of yesterday September 24th, we were still not registered as a corporation with the state of Florida. We have made several attempts to do so as the attached documents to this letter show. However, the check that was mailed to your department in January of this year was not cashed. We are sending another check for the amount of \$122.50 to request incorporation. Please waive any late charges since we have made every effort to pay.

Should you have any questions regarding this situation please contact me at 305-284-4505.

Respectfully,

Robert J. DuBord

Secretary Treasurer of WVUM, Inc.