

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 13, 2002 8:00 am
Secretary of State

05-02-2002 90130 005 ***150.00

DOCUMENT # P97000067651

1. Entity Name
Wesham Incorporated

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 520 Brickell Key Drive		3. Mailing Address 520 Brickell Key Drive	
Suite, Apt. #, etc. Suite 0-305		Suite, Apt. #, etc. Suite 0-305	
City & State Miami FL		City & State Miami FL	
Zip 33131	Country US	Zip 33131	Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 650774458	Applied For <input type="checkbox"/> Not Applicable
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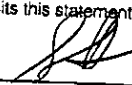
5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Transglobal Corporate Administration
Street Address (P.O. Box Number is Not Acceptable) 520 Brickell Key Drive Suite 0-305
City Miami FL Zip Code 33131

8. 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  President Transglobal Corporate Administration

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 15 Fee is \$150.00
After May 15 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

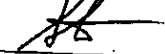
11. OFFICERS AND DIRECTORS

TITLE PS	NAME John Colao	STREET ADDRESS 520 Brickell Key Drive Suite 0-305	CITY-ST-ZIP Miami FL 33131
TITLE AS	NAME Stephen A Freeman	STREET ADDRESS 520 Brickell Key Drive Suite 0-305	CITY-ST-ZIP Miami FL 33131
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

3. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  Stephen A. Freeman 4/24/02 (305) 374-3800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #