2002 UNIFORM BUSINES	S REPORT (UBR
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200	2 UNIF	ORM BUS	NESS REI	PORT	(UBR)		-u =D			
DOCUMENT # A09815							FILED			
1. Entity Name W-P PARTNERS, LTD.					02 MAY -1 PM 5: 38					
W-F PARINERS, LID.						SECRE	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Address						TACCAMO				
P.O.BOX 5403 P.O.BOX 5403			2001							
FT.LAUDERDALE FL 33310 FT.LAUDERDALE FL 33310			33310							
_										
Principal Place of Business Address Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.		DUE BY MAY 1, 2002					
City & State			City & State		4. FEI Numbe	59-2047873	Applied For Not Applicable			
Zip	Zip Country		Zip	Country		5. Certificate of	of Status Desired	\$8.75 Additional Fee Required		
-	6. Name a	nd Address of Current F	Registered Agent		Name	7. Name and Address of New Registered Agent				
LEVAN, ALAN B				Name						
1750 E. SUNRISE BLVD.				Street Address (P.O. Box Number is Not Acceptable)						
P.O.BOX										
FT. LAUDERDALE FL 33310				City	FL Zip Code					
8. The above	named entity s	ubmits this statement for	the purpose of changin-	g its registere	ed office or regis	stered agent, or both	-	<u> </u>		
				-	-	•	,			
SIGNATURE .	Signature, typed or p	orinted name of registered agent ar	nd title if applicable.			7.44	DATE			
Capital Cor as Shown of		\$1,120,000.00	10. Amount of C in FLOR!DA		outions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION				
	A GE	NERAL PARTNER TH	AT IS A BUSINESS	ENTITY M	UST BE REGI	STERED AND A	CTIVE WITH THIS OFF	CF		
12.	NOTE. G	GENERAL PARTNER		n the form	; an amendm	ent must be filed	to change a general p			
DOCUMENT #	F11599	AL CORROBATION		STREE	ET ADDRESS	Abblicas of langes one!				
NAME STREET ADDRESS		AL CORPORATION NRISE BLVD.				· · · · ·		. =		
CITY-ST-ZIP		DALE FL 33310		CITY-	ST-ZIP		BK			
DOCUMENT # NAME				STREE	ET ADDRESS					
STREET ADDRESS						<u> </u>	<u>10065503</u> -0\$/10/02	3965U 01093003		
OTY-ST-ZIP			CITY-	ST- ZIP		****526.25 ****526.25				
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STREET ADDRESS				CITY-S	ST-ZIP	·	"			
CITY-ST-ZIP DOCUMENT #						· · · · · · · · · · · · · · · · · · ·				
NAME .				STREE	T ADDRESS					
STREET ADDRESS CITY-ST-ZIP	···			CITY-S		W.L.				
midiodiod (on and report is	formation supplied with the true and accurate and the powered to execute this	ai my siunature snan na	ive life same	redar enect as it	Section 119.07(3)(i), made under oath; t	Florida Statutes. I further co hat I am a General Partner o	ertify that the information of the limited partnership or		

SIGNATURE: ____

4/23/2002 Date