2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCU 1. Entity Nar	MENT # A326	12					
WISU PROPERTIES, LTD.					FILED		
	7 78				02 APR 25 PM 12: 49		
Principal Place of Business Mailing Address					,		
421 DAROCO AVENUE 421 DAROCO AVENUE CORAL GABLES FL 33146 CORAL GABLES FL 33146					SECRETARY OF STATE		
COTAL GAD	ELS 16 00140	CONAL GABLES PL 33140			TALLAHASSEE, FLORIDA	_	
2. Principal Place of Business 3. Mailing Address					, i realen faar Hilfe Held Bildt Lindin Hal Brein bien bien enen enen bien bien bien b	lì	
Suite, Apt. #, etc. Suite, Apt. #, etc.					DUE BY MAY 1, 2002	\Box	
City & State		City & State			4. FEI Number 65-0313517 Applied For Not Applical		
Zip Country		Zip	Zip Country _		*5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Curren	nt Registered Agent			7. Name and Address of New Registered Agent		
DIGINADA MOOD FOC				Name			
RICHARD A. WOOD, ESQ. % FOWLER WHITE BURNETT				Street Address (P.O. Box Number is Not Acceptable)			
100 SE 2ND STREET, 17TH FLOOR						\dashv	
MIAMI FL 33131				City Zip Code			
9 The shave		f			red agent, or both, in the State of Florida.	_{	
SIGNATURE , 9. Capital Co as Shown		10. Amount of Capital			DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE		
as snown	A GENERAL PARTNER	THAT IS A BUSINESS ENT	ITY M	64,703.80 UST BE REGIS	TERED AND ACTIVE WITH THIS OFFICE	\dashv	
12.	GENERAL PARTNE		form	; an amendmer	nt must be filed to change a general partner. ADDRESS CHANGES ONLY		
DOCUMENT /	NT / V16349			STREET ADDRESS			
name Street address	WLW GROUP, INC. S 421 DAROCO AVENUE		SINC	ET ADURESS	The state of the s	_[
CITY-ST-ZIP	CORAL GABLES FL		C!TY-	-ST-ZIP			
DOCUMENT#			STRE	ET ADDRESS			
STREET ADDRESS		للمستعدد والمراد المعتمد والاراد	CITY-	-ST-ZIP	400005451814	3	
DOCUMENT #			STRE	ET ADDRESS	400005451814 -05/06/0201010004 ****\$26.25 ****\$526.25	5	
STREET ADDRESS CITY-ST-ZIP			CITY-	-ST-ZIP		\dashv	
DOCUMENT #			STREE	ET ADDRESS		\dashv	
STREET ADDRESS			CITY+	ST-ZIP		\dashv	
CITY-ST-ZIP DOCUMENT #				ET ADDRESS		\dashv	
IAME TREET ADDRESS		İ	JINCO	- ADDRESS		_	
CITY-ST-PIP			CITY-	ST-ZIP			
OCUMENT /			STREE	T ADDRESS			
ITY-ST-ZIP			CITY-	ST-ZIP			
	ertify that the information supplied with on this report is true and accurate and er or trustee empowered to execute th				ction 119.07(3)(i), Florida Statutes. I further certify that the information hade under oath; that I am a General Partner of the limited partnership	or	