## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Jan 14, 2003 8:00 am Secretary of State

01-14-2003 90039 002 \*\*\*\*55.00

DOCUMENT # L 000000 4071 WESNET CAPITAL LLC 20006631 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3109 GRAND AVE 3109 GRAND AVE DO NOT WRITE IN THIS SPACE 4. FEI Number 65 - 099 8768 Applied For Country 5. Certificate of Status Desired \$5.00 Additional Fee Required 7. Name and Address of Current Registered Agent **DO NOT WRITE** IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent Make Check Payable to Florida Department of State **DUE BY MAY 1** 9, TITLE MANASING MER CR2E083B (12/02 ALEXANDER BURNER NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP C#Y-\$1-28 TITLE MAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CHY-ST-70 TITLE NAME STREET ADDRESS STREET ADDRESS. **DO NOT WRITE** CITY-ST-ZIP CHTY-51-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CHY-ST-ZP BBE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-51:-21P me NAME STREET ADDRESS STREET ADORESS CHY-SI-71P 11. Thereby certify that the information supplied with this filling 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 is true and accordate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.