

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L21947

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: WESPED, INC.

Current Principal Place of Business:

190 CASOURINA CONCOURSE
CORAL GABLES, FL 33143

New Principal Place of Business:

Current Mailing Address:

C/O BDPD
ONE S.E. THIRD AVENUE, 15TH FLOOR
MIAMI, FL 33131

New Mailing Address:

C/O BARRY M. BRANT, BERKOWITZ ET AL
200 SOUTH BISCAYNE BLVD., SIXTH FLOOR
MIAMI, FL 33131

FEI Number: 65-0360793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT, BARRY M
ONE S.E. THIRD AVENUE
15TH FLOOR
MIAMI, FL 33131

Name and Address of New Registered Agent:

BRANT, BARRY M
200 SOUTH BISCAYNE BLVD
SIXTH FLOOR
MIAMI, FL 33131

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:

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVIDSSON, LARS
Address: 190 CASOURINA CONCOURSE
City-St-Zip: CORAL GABLES, FL 33143

Title: V () Delete
Name: BRANT, BARRY
Address: ONE S.E. THIRD AVENUE, 15TH FLOOR
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: BRANT, BARRY
Address: 200 SOUTH BISCAYNE BLVD, SIXTH FLOOR
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARS DAVIDSSON

P

04/30/2002

Electronic Signature of Signing Officer or Director

Date