
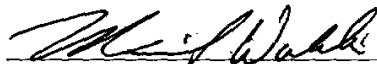


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

V# 29393

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b>  MAR 29 PM 5:00  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
<b>1. Name and Mailing Address of Limited Liability Company</b>  <b>DOCUMENT # M9600000439</b>  WESCHAP LLC 80 MAIDEN LANE NEW YORK NY 10038		<b>1a. Principal Place of Business Address</b>  80 MAIDEN LANE NEW YORK NY 10038			
<b>2. Principal Place of Business</b> One Seaport Plaza Suite, Apt. #, etc. 17 <sup>th</sup> Floor City & State New York NY Zip 10038		<b>2a. Mailing Address</b> One Seaport Plaza Suite, Apt. #, etc. 17 <sup>th</sup> Floor City & State New York NY Zip 10038		<b>3. Date Organized or Qualified</b> 11/06/1996  <b>3a. State of Formation</b> NY  <b>4. FEI Number</b> 13-3808962 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Date of Last Report</b> 04/20/1998		<b>6. Certificate of Status Desired</b> <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
<b>7. Name and Address of Current Registered Agent</b>  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  800002833138--9 -04/08/99--01050--014 ****188.75 ****188.75			<b>8. Name and Address of New Registered Agent/Office</b> Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City FL Zip Code		
<b>9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.</b>					
SIGNATURE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when not a drop)</small>			DATE _____		
<b>10. Title</b>	<b>Managing Members/Managers</b>	<b>Business Street Address</b>		<b>City, State and Zip Code</b>	
MGR	CHAPDELAINE, RICHARD F	<del>80 MAIDEN LANE</del> <del>One Seaport Plaza</del>		NEW YORK NY 10038	
MGR	WALSH, MICHAEL E	<del>80 MAIDEN LANE</del> <del>One Seaport Plaza</del>		NEW YORK NY 10038	
MGR	SIMON, J. PETER	10990 WILSHIRE BLVD., SUITE		LOS ANGELES CA	
MGR	Phelan, Gerard T	One Seaport Plaza		New York, NY 10038	
MGR	Miller, Robert K	One Seaport Plaza		New York, NY 10038	
<b>11. I do 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 annual report is true and accurate 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.</b>					
<b>SIGNATURE:</b> 		3/23/99 212-208-9120			