P03000115770

(Red	questor's Name)			
(Address)				
(Add	dress)			
(City	//State/Zip/Phone	e #)		
PICK-UP	TIAW [MAIL		
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(Document Number)				
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Special Instructions to F	iling Officer:			
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SEURCIARY OF STAIL ALLAHASSEE, FLORIDA

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March 9, 2004

CURVES OF CHIEFLAND JASON WISHAM P.O. BOX 407 HOLLISTER, FL 32147

SUBJECT: WISHAM INC. Ref. Number: P03000115770

We have received your document for WISHAM INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You do not need to file a change of agent form, you are already showing as registered agent. You need to file your 2004 annual report to remove or changes officers/directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Letter Number: 104A00015569

Cheryl Coulliette Document Specialist

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Wisham Inc. (Name of Corporation)
DOCUMENT NUMBER: PO3000/15770
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jason Wisham (Name of Person)
(Name of Firm/Company)
P.O. Box 407 (Address)
Hollister Fl 32147 (City/State and Zip Code)
For further information concerning this matter, please call:
Tason Wisham at (386) 7546-6401 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Debra U	<i>Jisham</i> , hereby	resign as Tre	(Title)
of Wishan	Name of Corporation)	:	······································
^	(Name of Corporation)	anized under the law	s of the State of
Florida			राजवर स

(Signature of resigning officer/director)

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to:

FILED

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