OMB APPROVAL							
OMB Number		3235-010					
Expires:	Januar	y 31, 200					
Estimated	average bu	rden hour					
nor rochon	60	0					

U.S. SECURITIES AND EXCHANGE COMMISSION WASHINGTON, DC 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

me and Address of Reporti	•				
ene	James	Н.			
t)	(First)	(Middle)			
est 57th Street					
	(Street)				
York					
у)	(State)	(Zip)			
te of Event Requiring Sta	tement (Month/Day/Y	rear)			
/31/02					
S or Social Security Numb	er of Reporting Per	son (Voluntary)			
suer Name and Ticker or T	rading Symbol				
llis Group Holdings Limit	ed/WSH				
lationship of Reporting P heck all applicable)	erson(s) to Issuer				
] Director ] Officer (give title be	[X]	10% Owner Other (specify	below)		
Amendment, Date of Origi	nal (Month/Day/Year	.)			
10/03					
dividual or Joint/Group F	iling (Check Appli	cable Line)			
] Form filed by One Repo	rting Person				
] Form filed by More tha	n one Reporting Per	son			
Table I Non-Deri	vative Securities B	Beneficially Own	ed		
	2 Amount of	Securities 3	. Ownership Form: Direct (D) or	4. Nature of Indirect Beneficial Own	
	Kohlberg Kravis Roberts est 57th Street  York  York  y)  te of Event Requiring Sta /31/02  S or Social Security Numb  suer Name and Ticker or T  llis Group Holdings Limit  lationship of Reporting P heck all applicable)  Director  Officer (give title be  Amendment, Date of Origi  10/03  dividual or Joint/Group F  Form filed by One Repo  Form filed by More tha  Table I Non-Deri	Kohlberg Kravis Roberts & Co. est 57th Street  (Street)  York New York  York New York  York State)  te of Event Requiring Statement (Month/Day/York)  Sor Social Security Number of Reporting Person (Social Security Person (Social Security Person)  Ilis Group Holdings Limited/WSH  Intionship of Reporting Person(Social Security Person)  Officer (give title below)  Memendment, Date of Original (Month/Day/Year 10/03)  dividual or Joint/Group Filing (Check Appliant)  Form filed by One Reporting Person  Form filed by More than one Reporting Person  Table I Non-Derivative Securities E	Kohlberg Kravis Roberts & Co. est 57th Street  (Street)  York New York 10019  York New York 10019  York Requiring Statement (Month/Day/Year)  /31/02  S or Social Security Number of Reporting Person (Voluntary)  suer Name and Ticker or Trading Symbol  llis Group Holdings Limited/WSH  lationship of Reporting Person(s) to Issuer heck all applicable)  Director [X] 10% Owner  Officer (give title below) [_] Other (specify)  Amendment, Date of Original (Month/Day/Year)  10/03  dividual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than one Reporting Person  Table I Non-Derivative Securities Beneficially Owner  Table I Non-Derivative Securities Beneficially Owner	Kohlberg Kravis Roberts & Co. est 57th Street  (Street)  York New York 10019  Yy) (State) (Zip)  te of Event Requiring Statement (Month/Day/Year)  //31/02  S or Social Security Number of Reporting Person (Voluntary)  suer Name and Ticker or Trading Symbol  llis Group Holdings Limited/WSH  lationship of Reporting Person(s) to Issuer heck all applicable)  ] Director [X] 10% Owner [_] Other (specify below)  Amendment, Date of Original (Month/Day/Year)  100/03  dividual or Joint/Group Filing (Check Applicable Line)  ] Form filed by One Reporting Person  ] Form filed by More than one Reporting Person	Kohlberg Kravis Roberts & Co. est 57th Street  (Street)  York New York 10019  York Requiring Statement (Month/Day/Year)  (31/02  S or Social Security Number of Reporting Person (Voluntary)  Suer Name and Ticker or Trading Symbol  Illis Group Holdings Limited/wSH  lationship of Reporting Person(s) to Issuer heck all applicable)  Director [X] 10% Owner   Officer (give title below) [_] Other (specify below)  Amendment, Date of Original (Month/Day/Year)  10/03  dividual or Joint/Group Filing (Check Applicable Line)   Form filed by More Reporting Person   Form filed by More than one Reporting Person  Table I Non-Derivative Securities Beneficially Owned

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly

Page 1 of 2

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)  Amount or		4.	Conver- sion or Exercise	Owner- ship Form of Derivative Security: Direct (D) or	6.	Nature of Indirect
	Date Exer- cisable	Expira- tion Date	Title	Number of Shares		Price of Derivative Security	 Indirect (I) (Instr. 5)		Beneficial Ownership (Instr. 5)
Explanation of Responses filling in the date from original filing.  ** Intentional misstat	s: This Am n Item 2 ab	nendment is file ove which was i	d solely for the nadvertently left	off of the					
Violations. See 18 U.S.C. 1001 Note: File three copies If space is insuf	of this F	orm, one of whi		ly signed.					
/s/ William J. Janetso	chek		1	/15/03					

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Date

\*\*Signature of Reporting Person William J. Janetschek, as attorney-in-fact for James H. Greene