2007 LIMITED PARTNERSHIP REINSTATEMENT

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FILED DOCUMENT # A02000000753 2007 MAY 10 AM 10: 23 OIG GLOBAL PRIVATE EQUITY FUND, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 800 CORPORATE DRIVE, SUITE #108 800 CORPORATE DRIVE, SUITE #108 FT LAUDERDALE, FL 33334 FT LAUDERDALE, FL 33334 pal Place of Business - No P.O. Box # Mailing Address N. WilliM1 Apt. #, etc. 01242007 CR2E100 (1/07) REIN-LP Applied For 4. FEI Number 04-3671505 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IND 1 John R THRISTINO, JOHN R Street Address (P.O. Box Number is Not Acceptable) 5535 N. MILITARY TRAIL, #1805 BOCA RATON, FL 33496 8. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointing ent of registered agent. I am familiar with, and accept the obligations of SIGNATURE In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice. FILE NOW!!! FEE IS \$1000.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. L02000012955 DOCUMENT # STREET ADDRESS NAME ASSET MANAGEMENT GROUP, LLC 800 CORPORATE DRIVE, STE #108 STREET ADDRESS CITY-ST-ZIP FI LAUDERDALE, FL 33334 LO 20000 MIGS 5 ASSET MINING FUME INT GROUP, LLC 200 MINING TO THE I CITY-ST-ZIP DOCUMENT # STREET ADDRESS --01007--006 **1990.00 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT / STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT A STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes. SIGNATURE: