LIMITED
PARTNERSHIP
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	B0300000438
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1. Name of Limited Partnership

MSPA Acquisition II, L.P.

2. Principal Office Address 1585 Broadway		· · · · · ·	3. Mailing Office Address 1585 Broadway		4. Date Formed or Registered To Do Business in Florida 12/19/2003		
Suite, Apt. #, etc. 37th Floor		Suite, Apt. #, etc. 37th Floor				<b>5.</b> FEI Number 20-0470510	Applied For Not Applicable
City & State New York, NY		City & State New York,	City & State New York, NY		CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee require for a Certificate of Status		
<sup>Zip</sup> 10036	Country USA	<sup>Zip</sup> 10036	Country USA			7a. Capital Contributions as shown on Record: \$250,000.00	
8. Name and Address of Current Registered Agent					<b>7b.</b> Amount of Capital Contributions in FLORIDA to date: \$! 250,000.00		
Name CT Corporation System					FEES:  1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52 50 and a maximum of \$437 50.		

et Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road

Suite, Apt. #, Etc.

10.

**Plantation** 

State FL

Zip Code 33324

- on amount entered eximum of \$437.50, for each year due this office
- 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
- Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
- Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) Community

SPECIAL ASSISTANT SPERETARY

02/10/05 DATE

## A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE

Name(s) of General Partner(s) MSPA Acquisition II GP, L.L.C.

City, State and Zip Code

10a.

1585 Broadway, 37th Fl.

New York, NY 10036

M03000004233

PENSTATEMENT 2004

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Telephone Number

617-946-2033

Applied For Not Applicable ditional Fee required ertificate of Status

Typed or Printed Name of General Partner Signing Form

See attached signature page

Signature Page

MSPA Acquisition II, L.P. Limited Partnership Reinstatement

SECRETARY OF STATE ALLAHASSEE FLORIDA

MSPA ACQUISITION II, L.P.

By: MSPA Acquisition II GP, L.L.C. its General Partner

By:

John Baczewski

Vice President