Telephone Number 212 499 6784

## 1399000000348 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<u>'</u>	LENGE READ?	TEE II TOTT TOTT	TOTIO DEL OTTE			
LIMITED PARTNERSH REINSTATEME	IIP	Secretary	TTMENT OF STATE Try of State CORPORATIONS	-	OS APR	
DOCUMENT # B990000348  1. Name of Limited Partnership  ASSET BETEILIGUNGSGESELLSCHAFT M6H \$ Co.				]   BR	26 AM 10: 58	
2. Principal Office Address	s	3. Mailing Office Addres	ess	4. Date Formed or Registered	77	
GRUNER + JAHR		GRUNER + JAHR		To Do Business in Florida		
Suite, Apt. #, etc. TAX DEPT 9th		Suite, Apt. #, etc. TRX DEPT 9th		5. FEI Number	Applied For	
/		ا مسا		13- 325 466	_	
375 LGVING TON AVE:  City & State		City & State		- 6	6. S8.75 Additional Fee required	
1/ 1/ 1/ 1/1/		No. 11 and All		CERTIFICATE OF STATUS DESIRED L	for a Certificate of Status	
NEW YOR	$\frac{i}{K}$ , $\frac{N}{N}$	VEN YOCK,		7a. Capital Contributions as shown on	Record:	
	Country	Zip	Country USA	\$ 1,200,0	000.00	
10017	U5A	10017	USF	7b. Amount of Capital Contributions in	FLORIDA to date:	
	8. Name and Address of	Current Registered Ager	nt			
Name / Savier /				FEES		
CORPORATION SERVICE CO.				1.) Filing Fee(s): Computed at a rate of \$	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,	
Street Address (P.O. Box N	lumber is Not Acceptable)	Do est		for <u>each year due</u> this office.		
1201 HAYS STREET Suite. Apt. #, Etc.				<ol> <li>Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.</li> </ol>		
,					3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.	
TALLAHASSEE State Zip Code FL 32301 - 2525				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.		
9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organ for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.				panized or registered under the laws of the State of uuthorized by its general partner(s). I hereby access 1 000553	ept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)				DATE		
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.						
10. Name(s) of Gen	ieral Partner(s)		h General Partner Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number	
	•	,	3.000	1000553		
				05/26/0501071-		
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ASSET Mb			111 7 7 /	Janaval Comme	•	
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				/ <i>b</i> r(,		
Note: General p	artners MAY NOT	 he changed on th	vis form: an amend	Iment must be filed to change	no a general partner	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.						
11. 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 sample affects 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 POLOTO OF POLATIC Diseases of Tores						

Typed or Printed Name of General Partner Signing Form \_\_\_\_\_

## 1399000000348

Financial Services

Gruner+Jahr Printing and Publishing Co. New York

375 Lexington Avenue, New York, New York 70017-5574 (212) 499-2000

February 18, 2005

APR 26 AM 10: 58
CHETARY OF STATE
LAHASSEE, FLORIDA

Division of Corporations Uniform Business Report Filings P.O. Box 6327 Tallahassee, FL 32314 Attn: Mr. Buck Kohr

RE: ASSET Beteiligungsgesellschaft mbH & Co.

Document #: B99000000348

EIN: 13-3254665

Dear Mr. Kohr,

We are submitting the original <u>\$437.50</u> filing fee for our 2004 Uniform Business Report Filings and a supplemental fee in the amount of <u>\$88.75</u>. Since we did not receive the first notice to file this Uniform Business Report we respectfully request the late filing fee be abated.

If you have any questions or require any additional information, please do not hesitate to contact me. Kindly acknowledge receipt of this form by signing and returning the enclosed copy of this letter.

Very truly yours,

ASSET BETEILIGUNGSGESELLCHAFT mbH

Mercedes Castro

Assistant Director of Taxes

**Enclosures**