

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 25 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F0000000775

1. Corporation Name

J.P. Morgan Advisors Inc.

JA

2. Principal Office Address

552 Fifth Avenue

3. Mailing Office Address

270 Park Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New York, NY

City & State

New York, NY

Zip

10036

Country

USA

Zip

10017

Country

USA

300025525913
12/16/03-01034-019 **1050.00
REINSTATEMENT 01-03

4. Date Incorporated or Qualified To Do Business in Florida

February 10, 2000

5. FEI Number

13-4062153

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State
FL

Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

Conne Bryan

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN

Date 11/25/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Director	George C. Gatch	522 Fifth Avenue	New York, NY 10036
Director	Evelyn E. Guernsey	522 Fifth Avenue	New York, NY 10036
President	Eric J. Carr	522 Fifth Avenue	New York, NY 10036
Secretary	Marianne K. Zychal	522 Fifth Avenue	New York, NY 10036
Asst. Secy.	James C. P. Berry	270 Park Avenue	New York, NY 10017
CFO	Tiffany L. Randall	522 Fifth Avenue	New York, NY 10036

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *Marianne K. Zychal* Marianne K. Zychal
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/19/03 (212) 837-1912
Date Daytime Phone #

CR2E081 (10/02)