

PA9C1013


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

01 JUN -7 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000002447

1. Corporation Name
IR Pine Corp.

2. Principal Office Address c/o Presidio Capital Corp. Suite, Apt. #, etc. 7 Bulfinch Place, Suite 500 City & State Boston, MA Zip 02114		3. Mailing Office Address Same Suite, Apt. #, etc. City & State Zip Country USA	
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4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 13-2757115	Applied For Not Applicable
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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
The Prentice-Hall Corporation System, Inc.
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
Suite 105
City
Tallahassee

State FL	Zip Code 32301
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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 Deborah D. Skipper **Deborah D. Skipper** Date 6-11-01
REGISTERED AGENT MUST SIGN **Asst Secretary**

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
see attached			

REINSTATEMENT 00-01173

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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)(l), 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: Allison Forester **Asst Secy** Date 6/1/01 Daytime Phone # 516 822-0025

CR28081 (9/00)

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IR PINE CORP.

OFFICERS:

RESIDENT
VICE PRESIDENT/ASSISTANT SECRETARY
VICE PRESIDENT/SECRETARY/TREASURER
VICE PRESIDENT/ASSISTANT SECRETARY
ASSISTANT TREASURER
ASSISTANT SECRETARY

MICHAEL ASHNER
PETER BRAVERMAN
CAROLYN TIFFANY
LARA SWEENEY
TOM STAPLES
ALLISON FORRESTER

* All above officers have an address c/o

Presidio Capital Corp.
7 Bulfinch Place, Suite 500
P.O. Box 9507
Boston, MA 02114-9507

VICE PRESIDENT
VICE PRESIDENT
VICE PRESIDENT

DAVID KING
STEVEN B. KAUFF
DALLAS E. LUCAS

*All above officers have an address c/o

Northstar Capital Investment Corp
527 Madison Avenue, 16th Floor
New York, NY 10022

DIRECTORS:

MICHAEL L. ASHNER
c/o PRESIDIO CAPITAL CORP.
FIVE CAMBRIDGE CENTER
10TH FLOOR
CAMBRIDGE, MA 02142



ACCOUNT NO. : 072100000032
REFERENCE : 171670 7201549
AUTHORIZATION : Patricia Pzyto
COST LIMIT : \$ 900.00

ORDER DATE : June 1, 2001
ORDER TIME : 3:12 PM
ORDER NO. : 171670-005
CUSTOMER NO: 7201549

CUSTOMER: Ms. Allison Forrester
Post & Heymann LLP - Presidio
Suite 214
100 Jericho Quadrangle
Jericho, NY 11753

DOMESTIC FILINGS

NAME: IR PINE CORP.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea EXT. 1114
EXAMINER'S INITIALS _____

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUN -6 PM 3:55
NOT RECORDED
TO AVOID
SUFFICIENCY OF FILING