PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F940000/473

 Corporation Name SKW II Gen-Par, Inc. FILED

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900011132669 01/28/03--01061--002 **300.00 2. Principal Office Address 3. Mailing Office Address 10 Hanover Square 10 Hanover Square Suite, Apt. #, etc. Suite, Apt. #, etc. 17th Floor Date Incorporated or Qualified 17th Floor To Do Business in Florida 03/23/1994 City & State City & State 5. FEI Number Applied For New York, NY New York, NY 752529255 Not Applicable Country Country CERTIFICATE OF STATUS DESIRED (\$\frac{1}{2}\$) S8.75 Additional Fee required for a Certificate of Status 10005 10005 USA USA

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.		79		
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	

Signature of Registered Agent Kohn Koters REGISTER

REGISTERED AGENT MUST SIGN

Date 11/06/2002

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Name of Titles City / State / Zip . Officers and/or Directors Officer and/or Director VPD Rothenberg, Stuart M 85 Broad Street New York, NY 10004 Р Neidich, Daniel M 85 Broad Street New York, NY 10004 VP 10 Hanover Square New York, NY 10005 Lahey, Brian VPM Rosenberg, Ralph 85 Broad Street New York, NY 10005 VP Williams, Todd 85 Broad Street New York, NY 10005 85 Broad Street New York, NY 10004 Naughton, Kevin D

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:

2 Totales

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

:Brian Lahey:VP

11/6/2002

212 590-9200

Daytime Phone #

CK E



Goldman, Sachs & Co. | 10 Hanover Square | New York, New York 10005

Tel: 212-902-1000

Goldman Sachs

November 6, 2002

Annual Report Filings Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

RE: WH1-PEOPLES SOUTHWEST GEN-PAR INC

> WHCB GEN-PAR INC WHCS GEN-PAR INC WHC-SIX GEN-PAR INC WHLCA GEN-PAR INC WHNML-S GEN-PAR INC SKW GEN-PAR INC W9/KL GEN-PAR INC

To Whom It May Concern:

W9/PHC GEN-PAR INC WH INVESTORS GEN-PAR INC WH TE-TWO INVESTORS GEN-PA WHLNB GEN-PAR INC WHML-S GEN-PAR INC WHORL GEN-PAR INC WHRB GEN-PAR INC WHTR INVESTORS INC WHUD :GEN-PAR INC WSK GEN-PAR INC

Enclosed please find Uniform Business Reports with remittances for the above-mentioned entities. Please note that these Reports, to date, were not delivered to the Mailing Address reflected in your records. We would ask that as a result of this, you waive any penalties and/or fees.

If you should have any questions, please contact me at 212-902-8012.

Thank-you.

Sincerely,

Jennifer L. Hanly Investment Tax Services

Enclosures

