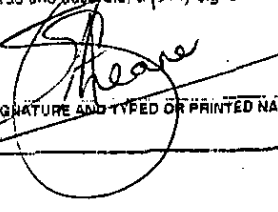


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000002079			
1. Corporation Name Bernhard Horstmann & Partners Ltd.			
Principal Place of Business		Mailing Address	
167 Madison Ave, Suite 500 New York, NY 10016		W99-27075	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number		Applied For	
13-3359111		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT use Post Office Box Numbers)	City / State / Zip
1	2	3	4
Pres	André G. Shearer	167 Madison Ave. Ste 500	New York, NY 10016
Sec/Treas	Stephen I. Siller	167 Madison Ave. Ste 500	New York, NY 10016
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Norbert Meissner 880' NE 69TH Street, #12-S Miami, FL 33138		Name C T 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 32301	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.		11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)	
Signature of Registered Agent NASEEM A. CONDE		SPECIAL ASST. SECRETARY	
12. 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)(f), 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: 		Andre Shearer Date 686 1300 (212) 844-4200 Daytime Phone	

I, ANDRÉ G. SHEARER

(Print full name)

herby declare that I am an AUTHORIZED PERSON making the

foregoing application for renewal and that the application has been read and that the contents and all statements contained are true, correct and complete.

X

(Signature)

ACKNOWLEDGED BEFORE ME

this 26 day of

October

1999

Day of Month

Month

Year

My commission expires on:

8/25/01

(Signature of NOTARY PUBLIC)

*Disabled individuals requiring special accommodations, please call the Department.





Nov 5, 1999

Mr. Sean Toner
Senior Section Administrator
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Ref. Number F94000002079

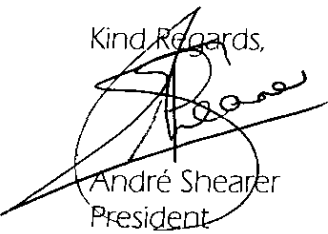
Dear Mr. Toner:

Our company recently moved, and notified your office of our new address. It was then discovered that a corporate annual report form was not filed in 1995 for our company, revoking our certificate of authority. We never received a 1995 corporate annual report form, which was why it was never filed – we had no idea the certificate had been revoked until now.

As this was the first (and only!) time our corporate annual report form wasn't filed, we request that we forgo the reinstatement fee under the one-time only waiver. Enclosed please find our reinstatement application and \$750.00 to cover the back and current filing, corporate supplemental and other fees.

Thank you in advance.

Kind Regards,


André Shearer
President