

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 08, 2009
Secretary of State**

DOCUMENT# P97000058413

Entity Name: COMPLETE CONFERENCE MANAGEMENT, INC.

Current Principal Place of Business:

11440 N KENDALL DR
SUITE 306
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

11440 N KENDALL DR
SUITE 306
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0768718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, HAROLD L
HABER, LEWIS & PATHMAN, LLP
2 SOUTH BISCAYNE BLVD SUITE 3660
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HAROLD L. LEWIS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLTZMAN, SUSAN O
Address: 14700 SW 87 COURT
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: KATZEN, BARRY T M.D.
Address: 5925 S W 107TH STREET
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: BENENATI, JAMES F M.D.
Address: 7400 S W 47TH COURT
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: ZEMEL, GERALD M.D.
Address: 6225 S W 98TH STREET
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN O HOLTZMAN

PRES

10/08/2009

Electronic Signature of Signing Officer or Director

Date