2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 759840

FILED Sep 21, 2006 Secretary of State

Entity Name: GREATER MIAMI HOST COMMITTEE INC

Entity Num	iie. OKLATLI	RIVIIAIVII 11031 COIVIIVII 11EE,	IIVO.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
701 BRICK SUITE 270 MIAMI, FL	0				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
701 BRICK SUITE 270 MIAMI, FL	0				
FEI Number:	59-2157172	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MIAMI, FL The above in the State	ELL AVENUE 33131 US named entity s		ourpose of changing its registere	d office or registered agent, or both,	
SIGNATOR		c Signature of Registered Ag	ent	 Date	
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CE () TRAINER, MON 2560 S BAYSHO COCONUT GRO	PRE DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DOZIER, CORN	AVE SUITE 2700	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CASTRO, HUGO	AVE.SUITE 9000	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KENNEDY, ROS	HORE DR #2002	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () KENT, RON, 701 BRICKELL A MIAMI, FL	Delete AVE #2700	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORNELIA DOZIER D 09/21/2006