

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F98000002841

Entity Name: DESERT HOTEL CORP.

FILED  
Feb 06, 2007  
Secretary of State

**Current Principal Place of Business:**

% AVR, ONE EXECUTIVE BLVD.  
YONKERS, NY 10701

**New Principal Place of Business:**

**Current Mailing Address:**

% AVR, ONE EXECUTIVE BLVD.  
YONKERS, NY 10701

**New Mailing Address:**

FEI Number: 13-3625322      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: FREDRICK E IDE

\_\_\_\_\_  
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: CP ( ) Delete  
Name: ROSE, ALLAN V  
Address: ONE EXECUTIVE BLVD.  
City-St-Zip: YONKERS, NY 10701

Title: V ( ) Delete  
Name: CHEIKES, VICKI G  
Address: 60 E. 42ND ST. #1411  
City-St-Zip: NEW YORK, NY 10165

Title: S ( ) Delete  
Name: IDE, FRED E  
Address: ONE EXECUTIVE BLVD.  
City-St-Zip: YONKERS, NY 10701

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERICK E IDE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

CFO

02/06/2007

\_\_\_\_\_  
Date