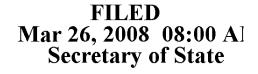


## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # F98000007070 1. Entity Name AREH MIAMI HOTEL OPERATING CORP. Principal Place of Business Mailing Address 445 HAMILTON AVE 445 HAMILTON AVE SUITE 1210 WHITE PLAINS, NY 10601 SUITE 1210 WHITE PLAINS, NY 10601





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4. FEI Number	FEI Number				
13-4039450			Not Applicable		
5. Certificate of Status Desired	1 [		3.75 Additional		

Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered ligent and title (	applicable (NOTE Registere	d Agent signature r	nature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	:		
10.	OFFICERS AND DIREC	TORS	·		- Darin Liter		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REESE, ALAN 445 HAMILTON AVE SUITE 1210 WHITE PLAINS, NY 10601				04.09208+301	767 05-015, 500, 00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS SALDARELLI, JOHN P 445 HAMILTON AVE SUITE 1210 WHITE PLAINS, NY 10601			DO	NOT WRI	TE .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SPAC	<b>E</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							