2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00527

1. Entity Name

MIAMI-DADE COUNTY FAIR & EXPOSITION, INC.

FILED
May 03, 2001 8:00 am §
Secretary of State

05-03-2001 90452 001 *****8.75 05-03-2001 90452 002 ****61.25

STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE DS CITY-ST-ZIP TITLE SANDRA, VANDEN K STREET ADDRESS STREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS						03-03-2001	. 90432 002	2 01	.23
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Separation Sep	City & Sta	te	City & State		4.	FEI Number 59-103981	1	_	
FUCHS, E DARWIN 10901 CORAL WAY MIAMI FL 33165 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florada. SIGNATURE Street Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Country	5.	Certificate of Status Desired		8.75 Ac	ditional
FUCHS, E DARWIN 10901 CORAL WAY MIAMI FL, 33165 8. 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 SIGNATURE Signature Signa		6, Name and Address of Current	Registered Agent		7.	Name and Address of New			
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12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3Vi). Florida Statutos I further certify that the information	CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP					

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR