2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00527

FILED May 02, 2007 Secretary of State

Entity Name: MIAMI-DADE COUNTY FAIR & EXPOSITION, INC.

	rincipal Place of Business:	New Principal Place of Business:
10901 COI MIAMI, FL	RAL WAY 33165 US	
Current M	ailing Address:	New Mailing Address:
10901 COI MIAMI, FL	RAL WAY 33165 US	
n accordan	: 59-1039811 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the corporation	did not receive the prior notice.
CLARK, PI 10901 COI MIAMI, FL	RAL WAY 33165 US	
	e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATU		
	Electronic Signature of Registere	d Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Γitle:	D () Delete	Title: () Change () Addition
\ddress:	DOTSON, ALBERT 17901 S W 78 AVE MIAMI, FL 33157	Name: Address: City-St-Zip:
Address: Dity-St-Zip: Fitle: Name: Address:	17901 S W 78 AVE	Address:
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	17901 S W 78 AVE MIAMI, FL 33157 DC () Delete KRINZMAN, RICHARD 2645 BAYSHORE DR., APT 1101	Address: City-St-Zip: Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip:	17901 S W 78 AVE MIAMI, FL 33157 DC () Delete KRINZMAN, RICHARD 2645 BAYSHORE DR., APT 1101 MIAMI, FL 33133 D () Delete LORIA, DOUGLAS S 3828 KUMQUAT AVE.	Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address: Address:	17901 S W 78 AVE MIAMI, FL 33157 DC () Delete KRINZMAN, RICHARD 2645 BAYSHORE DR., APT 1101 MIAMI, FL 33133 D () Delete LORIA, DOUGLAS S 3828 KUMQUAT AVE. MIAMI, FL 33133 D () Delete FUCHS, E. DARWIN, 6401 SW 102ND STREET	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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILLIP M. CLARK PRES 05/02/2007