

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90364 044 \*\*\*\*70.00

**DOCUMENT # N00527**

1. Entity Name

**MIAMI-DADE COUNTY FAIR & EXPOSITION, INC.**



Principal Place of Business

**10901 CORAL WAY  
MIAMI FL 33165-2337**

Mailing Address

**10901 CORAL WAY  
MIAMI FL 33165-2337**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1039811**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**FUCHS, E DARWIN  
10901 CORAL WAY  
MIAMI FL 33165**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
NAME **DOTSON, ALBERT**  
STREET ADDRESS **17901 S W 78 AVE**  
CITY-ST-ZIP **MIAMI FL**

TITLE **SD** ☐ Change ☒ Addition  
NAME **CARPENTER, WILLIE L**  
STREET ADDRESS **10965 S W 188 ST**  
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **DCE** ☐ Delete  
NAME **KRINZMAN, RICHARD**  
STREET ADDRESS **2601 BAYSHORE DR., STE 600**  
CITY-ST-ZIP **MIAMI FL 33133**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **LORIA, DOUGLAS S**  
STREET ADDRESS **5855 SUNSET DR**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE **D** ☒ Change ☐ Addition  
NAME **LORIA, DOUGLAS S**  
STREET ADDRESS **3828 KUMQUAT AVE**  
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE **DP** ☐ Delete  
NAME **FUCHS, E. DARWIN**  
STREET ADDRESS **6401 SW 102ND STREET**  
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **DC** ☐ Delete  
NAME **GRIFFITH, JACK**  
STREET ADDRESS **9490 SW 117TH TERRACE**  
CITY-ST-ZIP **MIAMI FL 33176**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **DT** ☐ Delete  
NAME **VANDEN, SANDRA K**  
STREET ADDRESS **7330 SW 52 CT**  
CITY-ST-ZIP **MIAMI FL 33143**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby 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]*

CR2E037 (10/02)

Attachment  
n00527  
20036756

D  
ALEXANDER, IVONNE  
12811 S W 148 ST RD  
MIAMI FL 33186

D  
CORA, EDUARDO F  
8961 S W 57 TER  
MIAMI FL 33173

D  
CUEVAS, ROGER  
12353 S W 104 LANE  
MIAMI FL 33186

D  
GALLAGHER, PAUL  
4011 GRANADA BLVD  
CORAL GABLES FL 33146

D  
R RAY GOODE  
7240 S W 146 TER  
MIAMI FL 33158

D  
MISICK, ROBERT  
11410 S W 110 LANE  
MIAMI FL 33176

D  
REILLY, MARY E  
5050 N W 3 CT #A  
DELRAY BEACH FL 33445

D  
RODRIGUEZ, MANUEL J  
5955 S W 88 CT  
MIAMI FL 33173

VT  
CLARK, PHILLIP M  
10302 S W 158 CT  
MIAMI FL 33196