

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
04 NOV -9 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P11136

1. Corporation Name

FINE HOST CORPORATION

3 GREENWICH OFFICE PARK

P.O. BOX 4992

2. Principal Office Address

3 GREENWICH OFFICE PARK

Suite, Apt. #, etc.

City & State

GREENWICH, CT

Zip

06831

Country

USA

3. Mailing Office Address

P.O. BOX 4992

Suite, Apt. #, etc.

City & State

STAMFORD, CT

Zip

06907

Country

USA

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida 8/15/86**

5. FEI Number
06-1156070

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.

City

PLANTATION

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11/5

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
C	NORMAN HABERMANN	114 E. DeLaGUERRA (Suite #6)	SANTA BARBARA, CA 93108
D	JEFF ARONSON	c/o ANGELO GORDEN, 245 PARK AV	NEW YORK, NY 10167
D	RUSS MARGOLIES	c/o SALOMAN BROS, 399 PARK AVE	NEW YORK, NY 10022

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Norman Habermann, President & CEO
10/22/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

805-965-4138

Daytime Phone #

CR2E081 (01/04)