

021240-1C
ORIGINAL

CK 11462
\$100.00
MC

1. Name of company or name of individual (not fictitious name or d/b/a):
MIAMI-DADE COUNTY FAIR & EXPOSITION, INC.

2. Name under which applicant will do business (fictitious name, etc.):
MIAMI-DADE COUNTY FAIR & EXPOSITION, INC.

3. Official mailing address:
Street: 10901 S.W. 24TH STREET
P.O. Box: —
City: MIAMI
State: FL Zip: 33165-2398

DEPOSIT
D280

DATE

DEC 16 2002

4. Florida address:
Street: 10901 S.W. 24TH STREET
P.O. Box: —
City: MIAMI
State: FL Zip: 33165-2398

5. Structure of organization:

- () Individual
- Corporation
- () General Partnership
- () Limited Partnership
- () Other: _____

Check received with filing and forwarded to Fiscal for deposit. Fiscal to forward deposit information to Records.

Initials of person who forwarded check:
SBM

6. If incorporated in Florida, provide proof of authority to operate in Florida:

Florida Secretary of State
Corporate Registration Number: N00527

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC 1
- OTH _____

Form PSC/CMU-32 (02/99)
Required by Commission Rule Nos. 25-24.510 & 25-24.511
File Name: cmu-32.doc

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FPSC-COMMISSION CLERK