2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000935

Entity Name: SEABOURN CRUISE LINE LIMITED INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6100 BLUE #400 MIAMI, FL	LAGOON DRI ^N 33126	√E					
Current Mailing Address:				New Mailing Address:			
LEGAL DEPT. 3655 N.W. 87 AVENUE MIAMI, FL 33178			LEGAL DEPT., MLGL 815 3655 N.W. 87 AVENUE MIAMI, FL 33178				
FEI Number:	54-2140635	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status D	esired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PEREZ, ARNALDO 3655 N.W. 87 AVENUE MIAMI, FL 33178 US				PEREZ, ARNALDO 3655 N.W. 87 AVENUE MLGL 815 MIAMI, FL 33178 US			
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: S/ ARNALDO PEREZ				01/04/2008			
	Electronic	Signature of Registered Age	ent			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CONOVER, PAM	DON DRIVE, #400		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	PINEDO GARCIA	DON DRIVE, #400		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	SOUSA, GEORG	DON DRIVE, #400		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VP () E PAGANOS, HELE 6100 BLUE LAGO MIAMI, FL 33126	N DON DRIVE, #400		Title: Name: Address: City-St-Zip:	PANAGOS, HEL	OON DRIVE, #400	
Title: Name: Address: City-St-Zip:	AS () E PEREZ, ARNALD 3655 N.W. 87 AV MIAMI, FL 33178	ENUE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	V () E RAPP, LARRY 6400 BLUE LAGO MIAMI, FL 33126			Title: Name: Address: City-St-Zip:	()	Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S/ ARNALDO PEREZ AS 01/04/2008