

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

50 MAY -1 AM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000047509 (2)**

FLORIDA CASINO CRUISES, INC.

Principal Office of Business: **520 BRICKELL KEY DRIVE, #1606 MIAMI FL 33131**
Mailing Address: **520 BRICKELL KEY DRIVE, #1606 MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date the corporation is organized: **06/21/1994** 3a. Date of Last Report

4. FEI Number: **65-0502848** Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for unreported tax under 1981 U.S. Florida Statutes: Yes No

2. Principal Office of Business: 2a. Mailing Address

21. State Apt # etc: 26. State Apt # etc

22. City, State: 27. City, State

23. Zip: 28. Zip

24. City: 25. Country: 29. City: 30. Country

9. Name and Address of Current Registered Agent

**KOLK, GLENN G
520 BRICKELL KEY DRIVE, #1606
MIAMI FL 33131**

81. Name

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

83.

84. City

85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607 (D)(2) and 607 (D)(3) Florida Statutes, the above named corporation adopts this statement for the purpose of funding its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a citizen of _____ and accept the obligations of Sections 607 (D)(2), Florida Statutes.

SIGNATURE: _____ (Current Registered Agent) _____ (New Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
12.1	PD MANLEY, KANT 520 BRICKELL KEY DRIVE, #1606 MIAMI FL 33131	13.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2	VD LYKINS, CHARLES 520 BRICKELL KEY DRIVE, #1606 MIAMI FL 33131	13.2	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.3	STD MAHAFFEY, CHARLES B 520 BRICKELL KEY DRIVE, #1606 MIAMI FL 33131	13.3	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.4	AVAS KOLK, GLENN G 520 BRICKELL KEY DRIVE, #1606 MIAMI FL 33131	13.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5		13.5	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6		13.6	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.7		13.7	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.8		13.8	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.9		13.9	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10		13.10	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this report is true and correct and that my signature shall have the same legal effect and force under laws that apply in the state of the corporation or the removal or transfer provisions covered to execute this report as required by Chapter 607 Florida Statutes, and that my name appears in Block 12 or Block 13 of this report in an attachment with an address.

SIGNATURE: *Glenn G. Kolk* Asst Sec. **GLENN G. KOLK** April 27, 1995 305 374-5200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR