2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 05, 2001 8:00 am Secretary of State **DOCUMENT # V51490** CRUISE ONE, INC. 03-05-2001 90078 019 ***150.00 Principal Place of Business Mailing Address TO FAIRWAY DRIVE STE: 200 to eairway drive ste. 200 DEERFIELD BEAGH FL 33441 DEERFIELD BEACH FL 39441 2. Principal Place of Business 3. Mailing Address 1415 N.W. 62 Street 1415 N.W. 62 Strect Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 205 205 Applied For 4. FEI Number 65-0349146 .auderdale Ff. Lauderdale. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IVIAN C-T-CORPORATION SYSTEM Street Address (P.D. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 ^{zig}2335 8. The above na purpose of changing its registered office or registered agent, or both, in the State of Florida. 2-23-0 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE ☐ Change ☐ Addition PERSICO, ANTHONY J NAME NAME STREET ADDRESS 10 FAIRWAY DRIVE, STE. 200 DELETE STREET ADDRESS CITY-ST-ZIP **DEERFIELD BEACH FL 33441** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE EWART, VIVIAN EWART, VIVIAN NAME NAME 1415 N.W. 42 ST. - Suite 205 STREET ADDRESS 10 FAIRWAY DRIVE, STE. 200 STREET ADDRESS CITY-ST-7IP DEERFIELD BEACH FL 33441 CITY-ST-ZIP Ft. Lauderdale, Fl. 33309 ☐ Addition TITLE □·Change TITLE ☐ Dēlete DOYLE, PATRICK NAME NAME 220 CONGRESS PARK DR. STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DELRAY BEACH FL 33445 Delete ☐ Change Addition TITLE TITLE **BELL. SUZANNE B** EWART JOSEPH NAME NAME 1415 N.W. 62 St. - Suite 205 220 CONGRESS PARK DR. DELETE STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL. 33309 CITY-ST-ZIP **DELRAY BEACH FL 33445** CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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 eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. (V.P.)VIVIAN EWART

CITY-ST-7IP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR