


**2006 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

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FILED

2006 AUG 21 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V51490					
1. Entity Name CRUISE ONE, INC.					
Principal Place of Business 1415 NW 62ND STREET SUITE 205 FORT LAUDERDALE, FL 33309 US			Mailing Address 100 SYLAN RD STE 600 WOBURN, MA 01801 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0349146	
Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			FL		
Zip Code			Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE 08/23/06					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Amended AR Is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GOWELL, AARON		NAME	BRADLEY TOLKIN	
STREET ADDRESS	100 SYLVAN RD STE 600		STREET ADDRESS	445 BROAD HOLLOW ROAD, STE 420B	
CITY-ST-ZIP	WOBURN, MA 01801		CITY-ST-ZIP	MELVILLE NY 11747	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPOHN, STEPHEN		NAME	JEFFREY TOLKIN	
STREET ADDRESS	100 SYLVAN RD STE 600		STREET ADDRESS	445 BROAD HOLLOW ROAD, STE 420B	
CITY-ST-ZIP	WOBURN, MA 01801		CITY-ST-ZIP	MELVILLE NY 11747	
TITLE		<input type="checkbox"/> Delete	TITLE	S/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	GIL STERNBACH	
STREET ADDRESS			STREET ADDRESS	3088 N. COMMERCE PARKWAY	
CITY-ST-ZIP			CITY-ST-ZIP	MIAMI, FL 33025	
TITLE		<input type="checkbox"/> Delete	TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	BRADLEY TOLKIN	
STREET ADDRESS			STREET ADDRESS	445 BROAD HOLLOW ROAD, STE 420B	
CITY-ST-ZIP			CITY-ST-ZIP	MELVILLE NY 11747	
TITLE		<input type="checkbox"/> Delete	TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	JEFFREY TOLKIN	
STREET ADDRESS			STREET ADDRESS	445 BROAD HOLLOW ROAD, STE 420B	
CITY-ST-ZIP			CITY-ST-ZIP	MELVILLE NY 11747	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	FRANK DOUBENTAKIS	
STREET ADDRESS			STREET ADDRESS	5 FAIRVIEW COURT	
CITY-ST-ZIP			CITY-ST-ZIP	UPPER BROOKVILLE NY 11771	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____			GIL STERNBACH 8-15-06 954-263-6336		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

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Addition

Title: D
Name: Jay Risher
Street Address: 19292 Sawgrass Lane
City-St-Zip: Huntington Beach, CA 92648

Title: D
Name: James Morrell
Street Address: 12315 NW 49th Street
City-St-Zip: Coral Springs, FL 33076