# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 19, 2004**
**Secretary of State**

DOCUMENT# P94000085143

**Entity Name:** CRUISE PLANNERS, INC.

**Current Principal Place of Business:**

3300 UNIVERSITY DR.
SUITE 602
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

3300 UNIVERSITY DR.
SUITE 602
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

**FEI Number: 65-0542790** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KORN, LYNN
5909 N.W. 126TH TERRACE
CORAL SPRINGS, FL 33076 US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: KORN, LYNN
Address: 5909 NW 126TH TERR
City-St-Zip: CORAL SPRINGS, FL 33076

Title: V ( ) Delete
Name: FEE, MICHELLE
Address: 9278 NW 13 PL
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S ( ) Delete
Name: DAVIS, MARVIN
Address: 21490 LAGUNA DR
City-St-Zip: BOCA RATON, FL 33433

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: FEE, MICHELLE
Address: 8225 NW 40TH COURT
City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LYNN KORN S 01/19/2004

Electronic Signature of Signing Officer or Director Date