

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 847272

**Entity Name:** CARNIVAL CORPORATION

**Current Principal Place of Business:**

3655 N.W. 87TH AVE.  
MLGL 815  
MIAMI, FL 33178-2428

**Current Mailing Address:**

3655 N.W. 87TH AVE.  
MLGL 815  
MIAMI, FL 33178-2428 US

**FEI Number:** 59-1562976

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name ARISON, MICKY  
Address 3655 NW 87 AVE  
City-State-Zip: MIAMI FL 33178

Title CFO  
Name BERNSTEIN, DAVID C  
Address 3655 NW 87TH AVE  
City-State-Zip: MIAMI FL 33178-2428

Title VP-S  
Name PEREZ, ARNALDO  
Address 3655 N.W. 87TH AVENUE  
City-State-Zip: MIAMI FL 33178-2428

Title VP-T  
Name WEINSTEIN, JOSHUA  
Address 3655 N.W. 87TH AVENUE  
City-State-Zip: MIAMI FL 33178-2428

Title PRESIDENT, CEO, DIRECTOR  
Name DONALD, ARNOLD W  
Address 3655 N.W. 87TH AVE.  
MLGL 815  
City-State-Zip: MIAMI FL 33178-2428

*I hereby 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 all other like empowered.*

**SIGNATURE:** ARNALDO PEREZ

**SECRETARY**

**01/14/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date