

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

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

**FILED**

**May 01 1996 8:00 am**

**Secretary of State**

**DOCUMENT # 847272 (2)**

1. Corporation Name

**CARNIVAL CORPORATION**

Principal Place of Business

Mailing Address

**3655 N.W. 87TH AVE.  
MIAMI FL 33166**

**3655 N.W. 87TH AVENUE  
MIAMI FL 33178-2428  
US**



|                                |         |                     |         |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business |         | 2a. Mailing Address |         |
| 21                             |         | 26                  |         |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |
| 22                             |         | 27                  |         |
| City & State                   |         | City & State        |         |
| 23                             |         | 28                  |         |
| Zip                            | Country | Zip                 | Country |
| 24                             | 25      | 29                  | 30      |

|                                                                                                                                                             |                                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| 3. Date Incorporated or Qualified                                                                                                                           | 3a. Date of Last Report                                        |
| <b>10/21/1980</b>                                                                                                                                           | <b>05/01/1995</b>                                              |
| 4. FEI Number                                                                                                                                               | Applied For<br>Not Applicable                                  |
| <b>59-1562976</b>                                                                                                                                           |                                                                |
| 5. Certificate of Status Desired                                                                                                                            | <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |
| 6. Election Campaign Financing Trust Fund Contribution                                                                                                      | <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>    |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                                                |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PEREZ, ARNALDO  
3655 NW 87TH AVENUE  
\*MIAMI FL 33178**

|           |                                                    |
|-----------|----------------------------------------------------|
| 81        | Name                                               |
| 82        | Street Address (P.O. Box Number is Not Acceptable) |
| 83        |                                                    |
| 84        | City                                               |
| <b>FL</b> | 85 Zip Code                                        |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable.

Signature typed or printed name of registered agent and title, if applicable.

DATE

| 12. OFFICERS AND DIRECTORS |                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                              |
|----------------------------|----------------------|-------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE                      | VCD                  | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | FRANK, HOWARD        | 1.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 3655 NW 87TH AVE     | 1.3 STREET ADDRESS                                    |                                                                              |
| CITY - ST - ZIP            | MIAMI FL             | 1.4 CITY - ST - ZIP                                   |                                                                              |
| TITLE                      | D                    | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | RUBEN, WILLIAM S     | 2.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 40 EAST 88TH ST.     | 2.3 STREET ADDRESS                                    |                                                                              |
| CITY - ST - ZIP            | NEW YORK NY          | 2.4 CITY - ST - ZIP                                   |                                                                              |
| TITLE                      | V                    | 3.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | ZEMNICK, LOWELL      | 3.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 3655 NW 87TH AVE     | 3.3 STREET ADDRESS                                    |                                                                              |
| CITY - ST - ZIP            | MIAMI FL             | 3.4 CITY - ST - ZIP                                   |                                                                              |
| TITLE                      | D                    | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | DICKINSON, ROBERT H. | 4.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 3655 NW 87 AVE.      | 4.3 STREET ADDRESS                                    |                                                                              |
| CITY - ST - ZIP            | MIAMI FL 33175-2428  | 4.4 CITY - ST - ZIP                                   |                                                                              |
| TITLE                      | PDC                  | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | ARISON, M. MICKY     | 5.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 3655 NW 87 AVE.      | 5.3 STREET ADDRESS                                    |                                                                              |
| CITY - ST - ZIP            | MIAMI FL             | 5.4 CITY - ST - ZIP                                   |                                                                              |
| TITLE                      | S                    | 6.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | TWITS, ALAN, R       | 6.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 3655 NW 87TH AVENUE  | 6.3 STREET ADDRESS                                    |                                                                              |
| CITY - ST - ZIP            | MIAMI FL             | 6.4 CITY - ST - ZIP                                   |                                                                              |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**April 16, 1996**

**(305) 4/16/96**

CR2E034 (12/95)

**ADDITIONAL OFFICERS AND DIRECTORS  
1996 CORPORATE ANNUAL REPORT  
CARNIVAL CORPORATION  
3655 N.W. 87th Avenue  
Miami, Florida 33178**

| <u>Title</u> | <u>Names of Officers<br/>and Directors</u> | <u>Street Address</u>                     | <u>City and State</u> |
|--------------|--------------------------------------------|-------------------------------------------|-----------------------|
| D            | Stuart Subotnick                           | 215 E. 67 St.                             | New York, N.Y.        |
| D            | Uzi Zucker                                 | 245 Park Ave.                             | New York, N.Y.        |
| D            | Maks L. Birnbach                           | 580 5th Ave.                              | New York, N.Y.        |
| D            | Richard G. Capen                           | 6077 San Elijo                            | Rancho Santa Fe, CA.  |
| D            | A. Kirk Lanterman                          | 300 Elliott Ave., W.                      | Seattle, WA.          |
| D            | Modesto Maidique                           | Florida Intnat'l Univ<br>P. C. 28 5       | Miami, Fl.            |
| D            | Sherwood M. Weiser                         | 3250 Mary Street                          | Miami, Fl.            |
| D            | Shari Arison                               | 23 Shaul Hamelech Blvd.                   | Tel Aviv, Israel      |
| D            | David Crossland                            | Parkway Three, Parkway<br>Business Center | Manchester, England   |
| D            | James Dubin                                | 1285 Ave. Of Americas                     | New York,, N.Y.       |
| S/V/D        | Meshulam Zonis                             | 3655 N.W. 87th Ave.                       | Miami, Fl.            |
| V            | Gerald R. Cahill                           | 3655 N.W. 87th Ave.                       | Miami, Fl.            |
| AS           | Arnaldo Perez                              | 3655 N.W. 87th Ave.                       | Miami, Fl.            |