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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OCEANS CASINO CRUISES, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

FRANK P. CRIVELLO

(Name of Person)

OCEANS CASINO CRUISES, INC.

(Firm/Company)

3408 DOVER ROAD

(Address)

POMPANO BEACH, FL 33062

(City/State and Zip code)

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For further information concerning this matter, please call:

FRANK P. CRIVELLO

(Name of Person)

at (954) 532-0240

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. OCEANS CASINO CRUISES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 20-0615257
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. NOVEMBER 12, 2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3408 DOVER ROAD, POMPANO BEACH, FL 33062
(Principal office address)
3408 DOVER ROAD, POMPANO BEACH, FL 33062
(Current mailing address)

8. CASINO CRUISES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box NOT acceptable)

Name: FRANK P. CRIVELLO

Office Address: 3408 DOVER ROAD

POMPANO BEACH, Florida 33062
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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A. DIRECTORS

Chairman: ROBERT WEISBERG
Address: c/o ALCO FINANCIAL, 900 LARKSPUR LANDING CIRCLE, SUITE 230
LARKSPUR, CA 94939

Vice Chairman: _____
Address: _____

Director: DAVID M. MARKS
Address: 1818 NORTH FARWELL AVENUE
MILWAUKEE, WI 53202

Director: SPIRO NAOS
Address: 1040 CORKWOOD STREET
HOLLYWOOD, FL 33019

B. OFFICERS

President: SPRIO NAOS
Address: 1040 CORKWOOD STREET
HOLLYWOOD, FL 33019

Vice President: GREG KARAN
Address: 4600 NORTH OCEAN DRIVE
HOLLYWOOD, FL 33019

Secretary: WILLIAM S. FISHER
Address: 200 WEST SILVER SPRING DRIVE, SUITE 210, GLENDALE, WI 53217

Treasurer: DAVID M. MARKS
Address: 1818 NORTH FARWELL AVENUE, MILWAUKEE, WI 53202

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David M Marks
(Signature of Director or Officer listed in number 12 of the application)

14. DAVID M. MARKS, DIRECTOR AND TREASURER
(Typed or printed name and capacity of person signing application)

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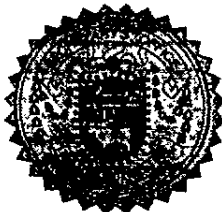
Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OCEANS CASINO CRUISES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JANUARY, A.D. 2004.

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DIVISION OF CORPORATIONS
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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2881069

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DATE: 01-21-04