

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91755 041 ***150.00

DOCUMENT # **F93000000222**

1. Entity Name

HALLMARK CRUISE SERVICES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12805 SW 84 AVE RD

Suite, Apt. #, etc

3. Mailing Address

12805 SW 84 AVE RD

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33156

Country

USA

Zip

33156

Country

USA

4. FEI Number

65-0378238

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

WILLIAM P. HARRIS, JR.

Street Address (P.O. Box Number is Not Acceptable)

9300 S. DADELAND BLVD.

SUITE 308

City

MIAMI

FL

Zip Code

33156

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.

SIGNATURE

Signature, typed or printed name of registered agent as to title is applicable

(NOTE: Registered Agent Signature required when necessary)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PD	FRASER, LEWIS A.	12805 SW 84 AVE RD.	MIAMI, FL 33156				
3	HARRIS, WILLIAM P JR.	9300 S. DADELAND BLVD. #308	MIAMI, FL 33156				
DVP	FRASER, LEWIS A. II	12805 SW 84 AVE RD.	MIAMI, FL 33156				

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or on an attachment with an address, with all other duly empowered

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEWIS A. FRASER
PRESIDENT

3/31/02

Date

305-969-8818

Daytime Phone #

CR2E034B (12/01)