## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED DOCUMENT # F95000003312 Jan 27, 2000 8:00 am 1. Entity Name **Secretary of State** NEW COMMODORE CRUISE LINES LIMITED, INC. 01-27-2000 90014 024 \*\*\*150.00 Principal Place of Business Mailing Address 4000 HOLLYWOOD BLVD #385-S 4000 HOLLYWOOD BLVD #385-S HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-6754 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 4. FE! Number 65-0586204 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent -Name MAYER, FRED Street Address (P.O. Box Number is Not Acceptable) 4000 HOLLYWOOD BLVD #385-S HOLLYWOOD FL 33021 Zip Code FL 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Delete Change TITLE TITLE NAME MAYER, FRED A NAME STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BLVD #385-S CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete TITLE ☐ Change ☐ Addition TITI F NAME NAME BINDER, JEFFREY I STREET ADDRESS STREET ADDRESS 9350 S. DIXIE HWY, SUITE 1220 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** . \_\_\_ Change \_\_\_ \_ Addition IIII F TITLE. NAME PRITZKER, ALAN NAME STREET ADDRESS STREET ADDRESS 1371 NW 172ND STREET CITY-ST-ZIP CITY-ST-7IP NORTH MIAMI FL ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME SANTOS, BLANCA STREET ADDRESS STREET ADDRESS 9350 S. DIXIE HWY, SUITE 1220 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

Dale

Daytime Phone #

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR