## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9500005804 (8)

HONEYMOON HOLIDAYS & CRUISES INC.  Principal Place of Business Mailing Address  2139 UNIVERSITY DRIVE, SUITE 103  CORAL SPRINGS FL 33071  CORAL SPRINGS FL 33071-6134										
							3. Date Incorporated or Qualified	,	ne of Last f	Report
2 Principal 9	Place of Business	20	Mailing Address			<u></u>	11/29/1995 4. FEI Number	U0/	06/1996	antical For
21	Control Control	26	Maning Address			•	65-0613031		<del></del>	pplied For ot Applicable
Suite, Apt	#, etc.	-	Suite, Apt. #, etc.							Additional
22		27					5. Certificate of Status Desired			equired
City & Stat	to		City & State		·····		6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
_ <b>Z</b> φ	Country	ļ,	Zip		untry		8. This corporation has liability fo			s. 199.032,
24	25	29		30	T			☐ Yes ☐		
	9, Name and Address of Curr	ent Hegis	terea Agent	<del></del>	81 N	ame	10. Name and Address of New R	egistered	Agent	
	CARTHY, RICHARD				01 14	anne				
	130 NW 2ND PLACE				82 St	treet Addre	ess (P.O. Box Number is Not Accepte	able)		
CUI	RAL SPRINGS FL 33071				83		····			
					84 Ci	ity		<b>C</b> 1	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0	502 and 6	07 1508 Florida Statu	tes the a	hove-na	med coroc	oration submits this statement for the	DIRDOSE O	changing	ite registered
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta am lamiliar with, and accept the obl	te of Florid	da Such change was	authorize	d by the	cornoration	on's board of directors. I hereby acco	ept the app	ointment as	registered
	arrianillar with, and accept the obt			فسفاح مادادما	4	corporation				
	•	nganon's O	, Section 607.0505, F	forida Sta	tutes.	COIPORAIIC				
	Signer #a typed or printed name of registered a						rd when reinstating)	DATE	······································	·
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poration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

Day\*me Phone # 0156197

May 12 1997 8:00am

Secretary of State