F960000003184

(Name of corporation - must include suffix)

TO: Qualification/lax Lien Section Division of Corporations

SUBJECT: __

CRUISE CONSULTANTS INC.

Dear Sir or M	adam:	
The enclosed Florida", "Cer foreign corpor	"Application by Foreign Corporation for Authorization to Trans tificate of Existence", and check are submitted to register the abration to transact business in Florida.	act Business in ove referenced
Please return a	all correspondence concerning this matter to the following:	
	Christine M. Coakley (Name of Person)	400001871864 -06/21/9601114006 _*****78.75 *****78.75
	CRUISE CONSULTANTS INC. (Firm/Company)	— Kind
	5414 W. Park Road (Address)	HNF 96
-	Hollywood, FL 33021 (City/State/Zip)	FILED DVISION OF STATE DVISION OF SOSPONATIONS 96 JUN 21 PH 12: 21
Should you nee	ed to call someone concerning this matter, please call:	Ö;
(Name of	on isome w. coakley at (3-0260 e Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:

Ι.	CRUISE CONSULTANTS INC.		
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION words or abbreviations of like import in language as will clearly indicate that it is a corporation instead natural person or partnership if not so contained in the name at present.)	d of a	
2.	Delaware 3, applied for		
	Delaware (State or country under the law of which it is incorporated) 3. applied for (FBI number, if applicable)		
4.	May 14, 1996 (Date of Incorporation) 5. perpetual (Duration: Year corp. will cease to experimental)	lus"	_
	"perpetual")	ist or	
6.	Une 14, 1996 (Date first transacted business in Florida, (SEE SECTIONS 607,1501, 607,1502, AND 817,155, F.S.)	35	IVIO IS
7	5414 W. Park Road	L II	
/.		<u> </u>	IJŹŢ
	Hollywood, FL 33021 (Current mailing address)	P	
	(Current mailing address)	Ÿ	골S
8.	Consulting Services	2	
٠. –	(Purposets) of companion and administration		
	(r dipose(s) of corporation authorized in nome state or country to be carried out in the state of Florida)	
9. I	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable)		_
9. 1	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable) Name: Christine M. Coakley		<u>-</u> <u>-</u>
9. 1	Name and street address of Fiorida registered agent: (P.O. Box or Mail Drop Box acceptable) Name: Christine M. Coakley Office Address: 5414 W. Park Road	NOT	<u>-</u>
9. 1	Name and street address of Fiorida registered agent: (P.O. Box or Mail Drop Box acceptable) Name: Christine M. Coakley Office Address: 5414 W. Park Road	NOT	_
•	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable) Name: Christine M. Coakley	NOT	<u>-</u>
10. Hav corp regi all s and	Name and street address of Fiorida registered agent: (P.O. Box or Mail Drop Box acceptable) Name: Christine M. Coakley Office Address: 5414 W. Park Road Hollywood , Florida, 33021	NOT	stated nt as

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Address: Vice Chairman: Address: ____ Address: Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) Christine M. Coakley President: 5414 W. Park Road Address: ____ Hollywood, FL 33021 Vice President: Address: _____ Secretary: ____Christine M. Coakley same as above Address: Christine M. Coakley Treasurer: same as above Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Christine M. Coakley

(Typed or printed name and capacity of person signing application)

State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRUISE CONSULTANTS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANLING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JUNE, A.D. 1996.

SECRETARY OF STATE DIVISION OF COMPONATIONS



Edward J. Freel, Secretary of State

AUTHENTICATION:

7991794

960178231

2621207 8300

DATE:

06-19-96