

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

FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000003209 (0)**

1. Corporation Name

R CRUISES, INC.

Principal Place of Business
**1800 ELLER DRIVE STE 300
FORT LAUDERDALE FL 33316**

Mailing Address
**1800 ELLER DRIVE STE 300
FORT LAUDERDALE FL 33316**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/19/1997	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 98-0164925	Applied For Not Applicable
23. Zip	24. Country	28. Zip	29. Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**COPROLITE CORPORATION
1 SE THIRD AVE STE 1400A
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VAS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOSS, STEPHEN A	1.2 NAME	
STREET ADDRESS	ONE SE THIRD AVE STE 1400	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33131	1.4 CITY - ST - ZIP	
TITLE	C	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUDNER, EDWARD B	2.2 NAME	
STREET ADDRESS	1800 ELLER DRIVE STE 300	2.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33316	2.4 CITY - ST - ZIP	
TITLE	P	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRBY, RICHARD L	3.2 NAME	
STREET ADDRESS	1800 ELLER DRIVE STE 300	3.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33316	3.4 CITY - ST - ZIP	
TITLE	VS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEL RIO, FRANK	4.2 NAME	
STREET ADDRESS	1800 ELLER DRIVE STE 300	4.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33316	4.4 CITY - ST - ZIP	
TITLE	VT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PICKUP, ROBERT E JR	5.2 NAME	
STREET ADDRESS	1800 ELLER DRIVE STE 300	5.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33316	5.4 CITY - ST - ZIP	
TITLE	AS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANTANGELO, CARL G	6.2 NAME	
STREET ADDRESS	3000 NO FEDERAL HIGHWAY STE 200	6.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33316	6.4 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

 **Stephen A Bloss** 3/19/98 (305) 377-9353

CR2E034 (10/97)