2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

1. Entity Name

SIGHTSEEING CRUISES, INC.



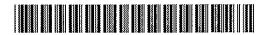
Principal Place of Business

C/O JOSEPH A. RUGARE, JR. 1000 SW FIRST WAY BOCA RATON, FL 33486

Mailing Address

1000 SW 1ST WAY BOCA RATON, FL 33486 US

FILED Apr 08, 2004 08:00 AM Secretary of State



01122004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2461860 Applied For Not Applicable

5. Certificate of Status Desired .

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUGARE, JOSEPH A., JR. 1000 SW FIRST WAY BOCA RATON, FL 33432

NAME STREET ADDRESS CITY-57-21P

DO NOT WRITE IN THIS SPACE

				IN THIS STACE		
the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and little	il applicable (NOTE Registered	d Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees		
10. TITLE	OFFICERS AND DIRECT	OTORS			- ··	
name Street address City-St-Zip	RUGARE, JOSEPH A., JR. 1000 SW 1ST WAY BOCA RATON, FL	-			- U00000106162	
title Name Street address City-St-Zip	VP RUGARE, JOSEPH A 7630 NW 47TH AVE COCONUT CREEK, FL 33073				04/08/04-80004-022 150.00	
Title Name Street address City-St-Zip	ST RUGARE, LUCILLE 1000 SW 1ST WAY BOCA RATON, FL 33486			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
title name street address city-st-zip						
TITLE						

12. I hereby certify that the information supplied with this filled 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: