2005 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

FILED Feb 14, 2005 08:00 AM DOCUMENT # J43361 **Secretary of State** CRUISE FOR FUN, INC. Mailing Address Principal Place of Business 7441 LAHANA CIRCLE 7441 LAHANA CIRCLE BOYNTON BEACH, FL 33437 **BOYNTON BEACH, FL 33437** 02112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2746762 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHWARTZ, JOSEPH L., ESQ. DO NOT WRITE 4040 SHERIDAN STREET HOLLYWOOD, FL IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. DS TITLE FOLZ, HAROLD NAME 7441 LAHANA CIRCLE STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33437 DP TITLE U000000229469 FOLZ, SANDY NAME 02/14/05-80079-029 150.00 STREET ADDRESS 7441 LAHANA CIRCLE CITY-ST-ZIP BOYNTON BEACH, FL 33437 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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.

OR DIRECTOR

2/11/05 56/-731-1992 Cate Dayone Phone