

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 28, 2004 08:00 AM
Secretary of State

DOCUMENT # J56278

1. Entity Name

CRUISE CAREERS INTERNATIONAL, INC.



Principal Place of Business

173 MINUTEMEN CAUSEWAY
COCOA BEACH FL 32931

Mailing Address

173 MINUTEMEN CAUSEWAY
COCOA BEACH FL 32931

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2774620

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LASCHA, GLORIA P
3833 S BANANA RIVER BLVD #403
COCOA BEACH FL 32931

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME LASCHA, GLORIA P
STREET ADDRESS 3833 S BANANA RIVER BLVD
CITY - ST - ZIP COCOA BCH. FL 32931

TITLE ST ☐ Delete
NAME LASCHA, JOHN T JR
STREET ADDRESS 3833 S BANANA RIVER BLVD #403
CITY - ST - ZIP COCOA BEACH FL 32931

TITLE V ☐ Delete
NAME LASCHA, JOHN T III
STREET ADDRESS 215 TIMPOOCHEE DR
CITY - ST - ZIP INDIAN HARBOUR BEACH FL 32937

TITLE V ☐ Delete
NAME ZARRAONANDIA, PATRICIA J
STREET ADDRESS 320 3RD ST
CITY - ST - ZIP MERRITT ISLAND FL 32953

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP
000000070619
03/01/04-80047-005 150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
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CITY - ST - ZIP

12. 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 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:

Gloria P. Lascha

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/04

321-783-9019

Date

Daytime Phone #