2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004746

FILED
Jan 15, 2007
Secretary of State

Entity Name: CAREFREE CRUISES, LLC

Current Principal Place of Business:

1121 N.W. 84TH TERRACE
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

1121 N.W. 84TH TERRACE
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAUSMAN, HARRY M
235 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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.

SIGNATURE: ______________________________

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	JACOBS, JOAN	
Address:	1121 NW 8TH TERR	
City-St-Zip:	HOLLYWOOD, FL 33024	

ADDITIONS/CHANGES:

Title:	MGR	(X) Change ( ) Addition
Name:	JACOBS, JOAN MRS	
Address:	1121 NW 8TH TERR	
City-St-Zip:	HOLLYWOOD, FL 33024	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOAN JACOBS MRS 01/15/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date