2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2007
Secretary of State

DOCUMENT# L06000024784

Entity Name: CELEBRATIONS AT SEA, L.L.C.

Current Principal Place of Business:

15450 NEW BARN ROAD, SUITE 312
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

15450 NEW BARN ROAD, SUITE 312
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 84-1704801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SANCHEZ, BARBARA
15450 NEW BARN ROAD, SUITE 312
MIAMI LAKES, FL 33014 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:	MGRM	( ) Delete
Name:	KNIGHT, LASHAWN	
Address:	15450 NEW BARN ROAD, SUITE 312	
City-St-Zip:	MIAMI LAKES, FL 33014	
Title:	MGRM	( ) Delete
Name:	ZIOMEK, PATRICIA	
Address:	15450 NEW BARN ROAD, SUITE 312	
City-St-Zip:	MIAMI LAKES, FL 33014	
Title:	MGRM	( ) Delete
Name:	SANCHEZ, BARBARA	
Address:	15450 NEW BARN ROAD, SUITE 312	
City-St-Zip:	MIAMI LAKES, FL 33014	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: PATRICIA ZIOMEK MRS 02/22/2007

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