

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006237

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: CRUISES FOR LESS, LLC

## Current Principal Place of Business:

1801 NW 66TH AVENUE  
SUITE 102  
PLANTATION, FL 33313

## New Principal Place of Business:

## Current Mailing Address:

1801 NW 66TH AVENUE  
SUITE 102  
PLANTATION, FL 33313

## 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:

RUDNER, EDWARD B  
1801 NW 66 AVENUE  
SUITE 102  
PLANTATION, FL 33313 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: ONLINE VACATION CENT, ER HOLDINGS CO R P.  
Address: 1801 NW 66TH AVENUE, SUITE 102  
City-St-Zip: PLANTATION, FL 33313

Title: P ( ) Delete  
Name: RUDNER, EDWARD B  
Address: 1801 NW 66 AVENUE, SUITE 102  
City-St-Zip: PLANTATION, FL 33313

Title: ST ( ) Delete  
Name: RUDERMAN, MARY LOU  
Address: 1801 NW 66 AVENUE, SUITE 102  
City-St-Zip: PLANTATION, FL 33313

Title: ASAT ( ) Delete  
Name: JOSOWITZ, BRENDA  
Address: 1801 NW 66 AVENUE, SUITE 102  
City-St-Zip: PLANTATION, FL 33313

Title: ASAT ( ) Delete  
Name: RUDNER, RALPH  
Address: 1801 NW 66 AVENUE, SUITE 102  
City-St-Zip: PLANTATION, FL 33313

## 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:

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 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: MARY LOU RUDERMAN

ST

03/23/2009

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