	ED LIABILITY COMPANY ANNUAL REPORT 1999 FEEL Annual Report \$100.00 +		Katherin Secretary DIVISION OF C		FIL 99 JUL 2 SECILET TALLAH	ED 7 PH 1: '	SATE MAJOR
\$ 588 1. Name	.75 Make Check Payal	ole To: FLOR	IDA DEPARTM	ENT OF STATE	SECTOR!	ASSEE	928
1 Name and Mailing Address of Limited Liability Company DOCUMENT # M9700000416 CRUISES ONLY, LLC 1011 EAST COLONIAL DRIVE ORLANDO FL 32803					1a. Principal Place of Business Address 1011 EAST COLONIAL DRIVE ORLANDO FL 32803		
2 Princip	oal Place of Business	2a. Mailing Address			3. Date Organized or Qualified 3s. State of Formation		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07/14/1997 DE 4. FEI Number DE		
City & State		City & State			59-345		Not Applicable
Zip	Country	Žip	Co	ountry	5. Date of Last F	·	6. Certificate of Status Desired S8 /5 Additional Fee Required
7. Name and Address of Current Registered DELL, SUZZANNE B TRAVEL SERVICES INTERNATION 220 CONGRESS PARK DR. DELRAY FL 33445			Agent				tered Agent/Office
			IAL	I, Street Address (P.O. Box Number Sulte, Apl. #, etc.		is Not Acceptable)	
			City			FL	Zip Code
its registe	ant to the provisions of Sections 608 red office or registered agent, or both, ored agent, and accept the obligation	in the State of Fix s.	rida. Such change w	as authorized by affirma	tive vote of a majorit	ubmits this state	s. I hereby accept the appointmen
10. Title	(Registered Agent Accepting Appointment) (OTE Registered Agent signature required when reinstating) Business Street Address		1)	City, State and Zip Code	
	TRAVEL SERVICE	PRAVEL SERVICES INTE, ruisc Corp.		-220 CONGRESS PARK DRIVE 300 Delaware Ave, 9th Fir-DE 5403			gtcn, DE 19801
						-03,/0 ****	2946746~- 2/9901006015 588.75 ****588.7