

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90261 041 ***150.00

0068940 AV

DOCUMENT # P00000107616 1. Entity Name CECRUISES, INC.			
Principal Place of Business 8017 NW 72ND ST TAMARAC FL 33321		Mailing Address 8017 NW 72ND ST TAMARAC FL 33321	
2. Principal Place of Business 5801 N.W. 62ND AVE Suite, Apt. #, etc. # 306		3. Mailing Address 7667 W. SAMPLE RD. Suite, Apt. #, etc. # 288	
City & State TAMARAC, FLORIDA		City & State CORAL SPRINGS, FLORIDA	
Zip 33319	Country USA	Zip 33065	Country U.S.A.
4. FEI Number 22-3765571		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent LEVENE, CHERI 8017 NW 72ND ST TAMARAC FL 33321		7. Name and Address of New Registered Agent Name PHILIP R. BARBELL Street Address (P.O. Box Number is Not Acceptable) 5801 N.W. 62ND AVE UNIT # 306 City TAMARAC FL Zip Code 33319	
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.			
SIGNATURE <u>Philip R. Barbell PRESIDENT</u> 7/9/01 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input checked="" type="checkbox"/> <small>(See criteria on back)</small>		FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBELL, PHILIP R <input type="checkbox"/> Delete 8017 NW 72ND ST TAMARAC FL 33321		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBELL, SONYA M <input type="checkbox"/> Delete 8017 NW 72ND ST TAMARAC FL 33321		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5801 N.W. 62ND AVE #306 TAMARAC, FLORIDA 33319		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5801 NW 62ND AVE #306 TAMARAC, FLORIDA 33319		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		



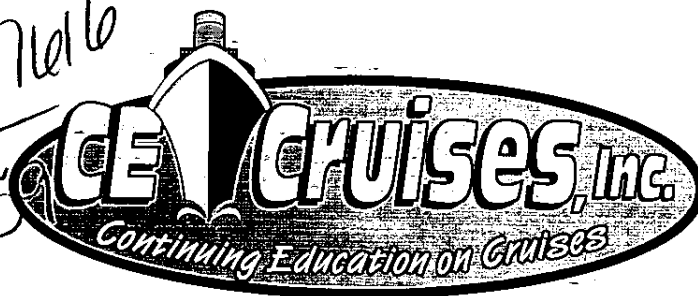
DO NOT WRITE IN THIS SPACE

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Philip R. Barbell **SIGNATURE REQUIRED** PHILIP R. BARBELL **7/9/01** **954-464-1072**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

Attachment
Doc # P00000107616
C0073105



July 9, 2001

Re: UBR Document # P00000107616

Uniform Business Report
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sirs,

Please accept the enclosed fee of \$150.00 for the year 2001. CECruises, Inc. is a new Florida corporation and I have just relocated to Florida. The registered agent tells me that she never received the original registration form in January of this year. The agent is my daughter and I have no reason to doubt her comments. Being new to this state I was not aware of the registration report that is required. I am changing the registered agent to myself now that I am permanently a resident of Florida.

Thank you for your understanding of this situation and prompt attention to this request.

Sincerely,

Philip R Barbell, P.O.S
Philip R. Barbell, President