## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## May 28, 2004 8:00 am Secretary of State DOCUMENT # P00000108725 1. Entity Name 05-28-2004 90003 025 \*\*\*150.00 CRUISES OF A LIFETIME, INC. Principal Place of Business Mailing Address 2929 E COMMERCIAL BLVD PHA FT LAUDERDALE FL 33308 2929 E COMMERCIAL BLVD PHA FT LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address 2333 N State Road 7 2333 N State Road 7 Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) <u>Suite C</u> <u>Suite</u> City & State City & State 4. FEI Number Applied For 65-1058193 maracite Not Applicable Maraate Country Country \$8.75 Additional 5. Certificate of Status Desired USA 330<u>63</u> 33063 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent VECCHIO, JOSEPH A JR Street Address (P.O. Box Number is Not Acceptable) 2929 E COMMERCIAL BLVD PHA FT LAUDERDALE FL 33308 City Zip Code FI 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signalure, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE PD Change ☐ Addition Berg, Jeannine 4736 portside onve BERG, JEANNINE NAME NAME 6093-D BUCKEYE COURT STREET ADDRESS STREET ADDRESS 30ca Raton, FL 33496 CITY - ST - ZIP TAMARAC FL 33319 CITY-ST-ZIP Detete TITLE Change ☐ Addition NAME CHERVENAK, CECELIA NAME STREET ADDRESS 8212 NW 91ST AVE STREET ADDRESS FORT LAUDERDALE FL 33321 City-St-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET AUDRESS CITY-ST-ZIP CITY-ST-7IP ■ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

leannine

SIGNATURE:

4-22-04

954-720-6355

**FILED** 

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## To Whom It May Concern:

I sent out a check along with the required form in April 2004, I noticed that the check was never cashed. I have attached a copy of the check # that I sent, and I am going to stop payment on the old check. I have enclosed another check, along with a copy of the form, seeing that I sent the original out with the first check. I am also sending this return receipt this time so there should not be any confusion. Thank you in advance for your help, and please call me if there is a problem.

Thank you.

Jeannine E. Berg Cruises of a Lifetime

Owner, President

Machinent 54055758 395 # POOOOO108725 ₩ DATE 4-22-04 TO Florida Department of State FOR 2004 FOR profit TOTAL COL bolation THIS CHECK Annual Report OTHER TRANS. +/-