FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90088 049 ***158.75

DOCUMENT # P00356

1. Corporation Name

Principal Place of Business

PRINCESS BAHAMAS VACATIONS, INC.

1170 LEE WAGENER BLVD SUITE 200 FORT LAUDERDALE FL 33315-3561 US 2. Principal Place of Business Suite, Apt. #, etc.		1170 LEE WAGENER BLVD SUITE 200 FORT LAUDERDALE FL 33315-3 US 2a. Mailing Address 26 Suite, Apt. #, etc.	561	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/20/1983 4. FEI Number 59-2350195 5. Certificate of Status Desired \$8,75 Additional Fee Required
	Country 25 9. Name and Address of Curre	29 30	Country 81 Name 82 Street Ar	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent
PLAN 11. Pursuant to office or re	egistered agent, or both, in the State	e of Florida. Such change was autho ations of, Section 607.0505, Florida	84 City ne above-named or rized by the corpora Statutes.	FL 85 Zip Code orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	ent and little if applicable. (NOTE: Regi	stered Agent signature req	uired when reinstating) DATE
12. TITLE NAME STREET ADDRESS	D WHITTEN, ROBIN E 4 GROSVENOR PLACE	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CONTROLLER & TREASURER Change Addition FERALD A. LAJONDE 900 THIRD AVENUE NOW YORK
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	London en PD Price, John F. 17895 Third Avenue New York Ny	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADD CITY-ST-ZIP	TC EVANS, JAMES E.M. 1805 THIRD AVENUE NEW YORK NY		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET APPLIES CITY-ST-ZIP	S Funke, R.H. *895,Third ave. New York Ny		4 1 TITLE 4 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IG OFFICER OR DIRECTOR