2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000057855

1. Entity Name

USA LATINO CRUISES & TOURS, INC.



FILED
May 03, 2004 08:00 AM
Secretary of State

Principal Place of Business

1524 WATTS AVE ORLANDO, FL 32809 Mailing Address

PO BOX 560956 ORLANDO, FL 32856



04122004

No Chg-P

CR2E034 (10/03)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

5. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BAUMAN, RAMONA 1524 WATTS AVE ORLANDO, FL 32809

SIGNATURE:

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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 PANONA BAULAN 4-20-2004					
Signalury, typed or printed name of indistered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.	_ '	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BAUMAN, RAMONA PO BOX 560956 ORLANDO, FL 32856				0 (17) 180 (8) (8) (7) (8) (7) (8) (7)
TITLE NAME STREE! ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME Street address City - St - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
12. Thereby 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					