

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063852

FILED  
Jan 27, 2004  
Secretary of State

**Entity Name:** CRUISES BY LISA WICKERS, INC.

**Current Principal Place of Business:**

326 BANYAN DRIVE  
MAITLAND, FL 327513106

**New Principal Place of Business:**

**Current Mailing Address:**

326 BANYAN DRIVE  
MAITLAND, FL 327513106

**New Mailing Address:**

**FEI Number:** 02-0618245

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WICKERS, FRANK  
326 BANVAN DR  
4TH FLOOR  
MAILANO, FL 33145 US

**Name and Address of New Registered Agent:**

WICKERS, FRANK  
326 BANVAN DR  
MAILANO, FL 33145 US

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:**

01/27/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WICKERS, LISA  
Address: 326 BANYAN DRIVE  
City-St-Zip: MAITLAND, FL 327513106

Title: STD ( ) Delete  
Name: WICKERS, FRANK  
Address: 326 BANYAN DRIVE  
City-St-Zip: MAITLAND, FL 327513106

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** LISA WICKERS

PD

01/27/2004

Electronic Signature of Signing Officer or Director

Date