2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064613

City-St-Zip:

DESTIN, FL 32541

Entity Name: SWEETHEART CRUISES, INC.

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
210A HAR DESTIN, F	RBOR BLVD FL 32541				
Current Mailing Address:			New Mailing Address:		
P. O. BOX DESTIN, F					
FEI Number	: 03-0469696	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	MARYANNE RBOR BLVD FL 32541 U	S			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP (WINDES, CHA 210A HARBOR DESTIN, FL 3:	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DSTV (HAEUSLER, S' 339 STAHLMA DESTIN, FL 3:	N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (HILL, ROBERT 852 KELL-AIRI		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: MARY ANNE WINDES M 04/10/2009