

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000109234

FILED
Apr 25, 2003
Secretary of State

Entity Name: MORRIS ENTERPRISE & CRUISES INC.

Current Principal Place of Business:

1611 NW 183RD STREET
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

1611 NW 183RD STREET
MIAMI, FL 33169

New Mailing Address:

FEI Number: 13-4216486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, KARLENE
7936 PANAMA ST.
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STEWART, DELROY
Address: 4355 NW 197TH ST
City-St-Zip: MIAMI, FL 33055

Title: D () Delete
Name: MORRIS, DOTHLYN
Address: 4355 NW 197TH ST
City-St-Zip: MIAMI, FL 33055

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEWART, DELROY
Address: 7936 PANAMA ST
City-St-Zip: MIRAMAR, FL 33023

Title: V (X) Change () Addition
Name: MORRIS, DOTHLYN
Address: 4355 NW 197TH ST
City-St-Zip: MIAMI, FL 33055

Title: P () Change (X) Addition
Name: STEWART, KARLENE J
Address: 7936 PANAMA ST
City-St-Zip: MIRAMAR, FL 33023

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

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

Title: NA () Change (X) Addition
Name: NA, NA N
Address: NA
City-St-Zip: NA, NA NA

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: KARLENE STEWART

P

04/25/2003

Electronic Signature of Signing Officer or Director

Date