2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000113115

Title:

Name:

Address:

City-St-Zip:

ELLIOTT, VALERIE L

ORLANDO, FL 32822

5575 S SEMORAN BLVD #4

Entity Name: CRUISE JOURNEYS AND TOURS INC

FILED Jan 06, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5575 S SEMORAN BLVD STE 4 ORLANDO, FL 32822 Current Mailing Address: New Mailing Address: New Mailing Address: STE 4 ORLANDO, FL 32822 FEI Number: 16-1634409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: Description of Control of C	•				
Current Mailing Address: New Mailing Address: 5575 S SEMORAN BLVD STE 4 ORLANDO, FL 32822 FEI Number: 16-1634409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BERKSON, GARY M ESQ 111 N ORANGE AVE STE 1200 ORLANDO, FL 32801 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: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: Title: D Name: ELLIOTT, TODD W Address: 5575 S SEMORAN BLVD #4	Current Principal Place of Business:			New Principal Place of Business:	
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Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: Title: D Name: ELLIOTT, TODD W Address: 5575 S SEMORAN BLVD #4			ubmits this statement for the p	urpose of changing its registered	office or registered agent, or both,
OFFICERS AND DIRECTORS: Title: D Name: ELLIOTT, TODD W Address: 5575 S SEMORAN BLVD #4	SIGNATUR	RE:			
Title: D Name: ELLIOTT, TODD W Address: 5575 S SEMORAN BLVD #4		Electroni	c Signature of Registered Age	ent	Date
Name: ELLIOTT, TODD W Address: 5575 S SEMORAN BLVD #4	OFFICERS	AND DIRECT	ORS:		
	Name: Address:	ELLIOTT, TODD 5575 S SEMORA	N BLVD #4		

I hereby 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 all other like empowered.

SIGNATURE: TODD ELLIOTT MR 01/06/2011