

P03 000078592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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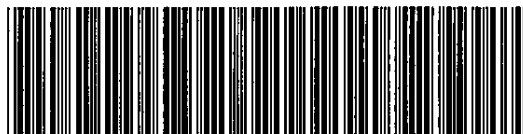
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

07 MAY -4 PM 2:53

APPROVED  
FILED

B. McKnight MAY 10 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CRUISES USA INC.

**DOCUMENT NUMBER:** P03000078592

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SONIA BATISTA

(Name of Contact Person)

CRUISES USA CORP.

(Firm/Company)

P O BOX 520574

(Address)

MIAMI FL 33152-0574

(City/State and Zip Code)

For further information concerning this matter, please call:

# ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

CMises U.S.A. INC

SECOND: The document number of the corporation (if known): P03000078592

THIRD: The file date of the articles of incorporation: 7-12-03

FOURTH: (CHECK AT LEAST ONE BOX)

- ☒ None of the corporation's shares have been issued.  
☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

- ☒ A majority of the incorporators authorized the dissolution.  
☐ A majority of the directors authorized the dissolution.

Signature: [Signature]  
 (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Sonia Batista  
 (Typed or printed name of person signing)

President  
 (Title of Person Signing)

Filing Fee: \$35

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

APPROVED  
 AND  
 FILED

(Address) \_\_\_\_\_  
 (Address) \_\_\_\_\_  
 (City/State/Zip/Phone #) \_\_\_\_\_  
☐ PICK-UP ☐ WAIT ☐ MAIL  
 (Business Entity Name) \_\_\_\_\_  
 (Document Number) \_\_\_\_\_

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## ARTICLES OF DISSOLUTION

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FIRST: The name of the corporation as currently filed with the Florida Department of State:

CAVISES U.S.A. INC

SECOND: The document number of the corporation (if known): P03000078592

THIRD: The file date of the articles of incorporation: 7-1-2003

FOURTH: (CHECK AT LEAST ONE BOX)

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Signature: \_\_\_\_\_

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

SONIA BATISTA

(Typed or printed name of person signing)

President

(Title of Person Signing)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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