

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032475

FILED
May 01, 2006
Secretary of State

Entity Name: CRUISE TRAVEL ADVISORS INC.

Current Principal Place of Business:

19009 E LAKE DRIVE
MIAMI, FL 33015

New Principal Place of Business:

398 LAKEVIEW DRIVE
STE. 205 - BLDG. 6
WESTON, FL 33326

Current Mailing Address:

19009 E LAKE DRIVE
MIAMI, FL 33015

New Mailing Address:

398 LAKEVIEW DRIVE
STE 205- BLDG. 6
WESTON, FL 33326

FEI Number: 02-0583452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYA, MAGDALENA
19009 E LAKE DRIVE
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

METLICK, CELINA
398 LAKEVIEW DRIVE - DRIVE
UNIT 205- BLDG 61
WESTON, FL 33326 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: CELINA METLICK

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOYA, MAGDALENA
Address: 19009 E LAKE DRIVE
City-St-Zip: MIAMI, FL 33015

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: METLICK, CELINA
Address: 398 LAKEVIEW DRIVE - #205-B61
City-St-Zip: WESTON, FL 33326

Title: SEC () Change (X) Addition
Name: MOYA, MAGDALENA
Address: 398 LAKEVIEW DRIVE - #205-B61
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CELINA METLICK

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date