FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P30959** **(1)**

1. Corporation Name

EUROPA CRUISES OF FLORIDA I, INC.

Principal Place of Business	Mailing Address
150 153RD AVE SUITE 200 MADEIRA BEACH FL 33708 US	150 153RD AVE SUITE 200 MADEIRA BEACH FL 33708 US

3. Date Incorporated or Qualified: 09/13/1990
3a. Date of Last Report: 05/31/1995

4. FEI Number: 59-3025155 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
150 153RD AVE
SUITE 200
MADEIRA BEACH FL 33708

10. Name and Address of New Registered Agent

81 Name: Bullock, Lester
82 Street Address (P.O. Box Number is Not Acceptable): 150-153rd AVE
83 Suite 200
84 City: Madeira Beach FL 85 Zip Code: 33708

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Lester E Bullock, President Lester E. Bullock President 4/22/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BULLOCK, LESTER E 150 153RD, SUITE 200 MADEIRA BEACH FL	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALTER, ERNST G 150 153RD AVE, SUITE 200 MADEIRA BEACH FL	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VITALE, DEBORAH A 150 153RD AVE, SUITE 200 MADEIRA BEACH FL	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	~~D~~ D.C	☒ Change ☐ Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	CFO Gladstone, Debra 150-153rd Ave, Suite 200 Madeira Beach, FL 33708	☐ Change ☒ Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	Reeley, Piers 150 153rd Ave, Suite 200 Madeira Beach, FL 33708	☐ Change ☒ Addition
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	100001834401 -05/22/96--01040--027 ***200.00	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lester E Bullock, President 4/22/96 813-393-2885
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #