

AMENDED

07-21-2003 90128 033 ***150.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

55054171

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P93000013608**

1. Entity Name
AMBASSADOR CRUISE LINES, INC.



Principal Place of Business
2621 NO. FEDERAL HIGHWAY
BOCA RATON FL 33431-7785
US

Mailing Address
2621 NO. FEDERAL HIGHWAY
BOCA RATON FL 33431-7785
US

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0390924** Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIMON, PHILIP E
129 EAST HALLANDALE BEACH BLVD
SUITE #1
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SIMON, ZINA 536 NE 199TH TERRACE NORTH MIAMI BEACH FL 33179	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDVS SIMON, PHILIP E 536 NE 199TH TERRACE NORTH MIAMI BEACH FL 33179	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIMON, PHILIP E 536 NE 199TH TERRACE NORTH MIAMI BEACH FL 33179	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

Handwritten signature and date: 7/15/03

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other those empowered.

SIGNATURE: *Philip E. Simon, Pres* 7/15/03 (561)
680-5500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)

AMBASSADOR

CRUISE • LINES

attachment

August 04th, 2003

Secretary Of State
Division Of Corporations
P.O. Box 6324
Tallahassee, FL 32314

55054171
#P3000013608



Attention: Annual Reports



Subject: Ambassador Cruise Lines, Inc

Reference Number: P93000013608



Dear Sirs:

As I have been advised by your office this date, we are resubmitting our 2003 annual report for your kind reconsideration. The following circumstances relating to this filing are as follows.



Initially, we moved to our present address about a year ago, and which former address you still have on file for our mailings. On July 15th, 2003 we received two (2) copies of our annual report that were forwarded to us from our former address, and which had been floating around somewhere in the Postal system.



Immediately upon receiving these annual report forms they were completed by us without any delay and forwarded to you via Federal Express, together with our letter of explanation including an outline of the details as we have explained herein.



Under these extenuating circumstances surrounding our filing, we ask you to please reconsider your letter of July 23rd which indicates that because of the late filing there is a balance due of \$400.00 in addition to the \$150.00 that accompanied our filing of the annual report which was sent to you originally via Federal Express on July 15th.



Please be further advised of our current address as it appears hereon so that we can avoid any such occurrence in the future Thank you kindly for your understanding regarding this matter, and ask that you please waive the \$400.00 late charge.



Sincerely,

Philip E. Simon
Philip E. Simon
President

USA Office: 2621 No. Federal Hwy., Suite MN, Boca Raton, FL 33431 • Phone: (561) 620-8500 • Fax: (561) 620-8999
E-mail: ambassadorcruise@bellsouth.net

UK Office: TMI 29 Saffron Court, Southfields Business Park, Basildon, Essex SS156SS • Phone: 01268-493003/001 • Fax: 01268-493002
E-Mail: ambassadorcruise@btconnect.com