

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
3/ Apr 22, 2008 8:00 am
Secretary of State
03-19-2008 90025 020 ***150.00

DOCUMENT # P93000052292 1. Entity Name CRUISERS ENTERTAINMENT, INC.	
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Principal Place of Business 6461 GARDEN ROAD SUITE 102 RIVIERA BEACH, FL 33404	Mailing Address 6461 GARDEN ROAD SUITE 102 RIVIERA BEACH, FL 33404
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66007633



02292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0429615	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BELL, DALE
4747 SQUARE LAKE DR.
PALM BEACH GARDENS, FL 33418

Dale L. Bell

**DO NOT WRITE
IN THIS SPACE**

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 3/7/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BELL, DALE 4747 SQUARE LAKE DRIVE PALM BEACH GARDENS, FL
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: *Dale L. Bell* 4/11/08 561-845-8212
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone