

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 PM 1:42

DOCUMENT # P93000079276 (0)

1. Corporation Name

CRUISE SAVERS, INC.

Principal Place of Business

122 BRANDY HILLS DR.
PORT ORANGE FL 32119

Mailing Address

122 BRANDY HILLS DR.
PORT ORANGE FL 32119

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated (or re-incorporated)	3a. Date of last report
125 BASIN ST, Ste 120		125 BASIN ST, Ste 120		11/17/1993	02/22/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FBI Number	Applied For
DAYTONA Bch, FL		DAYTONA Bch, FL		59-3210205	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
32114		32114		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Country		Country		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No
24 32114		25 Volusia		29 32114 30 Volusia	

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL, CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

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

Angela M. Lanktree

(NOTE: Registered Agent's signature required when constituting)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	1. TITLE	☒ Change ☐ Addition
NAME	12 NAME	
STREET ADDRESS	13 STREET ADDRESS	
CITY - ST - ZIP	14 CITY - ST - ZIP	
TITLE	2.1 TITLE	☒ Change ☐ Addition
NAME	22 NAME	
STREET ADDRESS	23 STREET ADDRESS	
CITY - ST - ZIP	24 CITY - ST - ZIP	
TITLE	3.1 TITLE	☐ Change ☐ Addition
NAME	32 NAME	
STREET ADDRESS	33 STREET ADDRESS	
CITY - ST - ZIP	34 CITY - ST - ZIP	
TITLE	4.1 TITLE	☐ Change ☐ Addition
NAME	42 NAME	
STREET ADDRESS	43 STREET ADDRESS	
CITY - ST - ZIP	44 CITY - ST - ZIP	
TITLE	5.1 TITLE	☐ Change ☐ Addition
NAME	52 NAME	
STREET ADDRESS	53 STREET ADDRESS	
CITY - ST - ZIP	54 CITY - ST - ZIP	
TITLE	6.1 TITLE	☐ Change ☐ Addition
NAME	62 NAME	
STREET ADDRESS	63 STREET ADDRESS	
CITY - ST - ZIP	64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct 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 person or persons 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 my attachment with an address.

SIGNATURE:

Angela M. Lanktree
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICE OR DIRECTOR

1/25/95