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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 10 1997 8:00 am Secretary of State

.iv	1997		Secret DIVISION OF	CORPOR		NS		Secreta	rv of S		
	MENT # P9400 SHORE CRUISES & TO		9 (8)								
Principal Plac	ce of Business	Mailing Ad	droce			*** *** *** ****		 		j ii tiili ikii	
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SARASOTA FL	34239	SARAOSTA I	FL 34239								
US		US					3. Date Incorporate	ed or Qualified		te of Last f	Report
9 Delevioral F	Place of Business	T On Mailing	Addeses				10/03/1994 4. FEI Number		04/1	1/1996	
z. Principal r	Place of Business	2a. Mailing	Address				65-0525949				pplied For
Sulte, Apt.	# etc	26 Suite A	.pt. #, etc.				0070020848				lot Applicab Additional
22		27	171. H OLO.				5. Certificate of Sta	atus Desired			Abditional lequired
City & Stat	te	City & S	State				6. Election Campa	ian Financina			May Be
23		28					Trust Fund Cont				to Fees
Zip	Country	Zip		Co	untry		8. This corporation	has liability for	intangible t	tax under :	s. 199.032,
24	25	29		30			Florida Statutes	t	Yes [] No	
	9. Name and Address of Cur	rrent Registered Ag	jent		81	Name	10. Name and Add	ress of New R	gistered A	\gent	
#81	Goldengate Point Asota FL 34236						ress (P.O. Box Number is Not Acceptable)				
11. Pursuant	to the provisions of Sections 607.0	0502 and 607,1508, tale of Florida, Such	Florida Statu change was	ites, the a	1 1	City -named cor	poration submits this sta	tement for the l	FL purpose of pt the appo		
11. Pursuant office or agent. I s SIGNATURE	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob-				above ed by itules.	named cor the corpora	poration submits this sta ition's board of directors ared when reinstating)	element for the , I hereby acce			
	Signature, typed or printed name of registered OFFICERS	d agent and little if applicable AND DIRECTORS	: (NC		above od by itules	named cor the corpora			purpose of pt the appo DATE CERS AND	changing changing printment as	its registere s registered RS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered OFFICERS	d agent and little if applicable AND DIRECTORS		TE Registere 13.	above ed by itules	named cor the corpora	ired when reinstating)		purpose of pt the appo DATE CERS AND	changing changing contract	its registere s registered RS IN 12
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14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

111-631113611