

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024282

FILED
Jul 27, 2004
Secretary of State

Entity Name: CRUISE MANAGEMENT INTERNATIONAL, INC.

Current Principal Place of Business:

960 ALTON ROAD
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

960 ALTON ROAD
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 65-0574360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, PHILIP
960 ALTON ROAD
SECOND FLOOR
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

NORRIS, ROBIN
960 ALTON ROAD
SECOND FLOOR
MIAMI BEACH, FL 33139 US

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.

SIGNATURE: ROBIN NORRIS

07/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: ZACHARIA, MICHAEL E
Address: 525 MARKET ST - 32ND FLOOR
City-St-Zip: SAN FRANCISCO, CA 941052708

Title: D () Delete
Name: BRENNAN, EDWARD J
Address: 525 MARKET ST 32ND FLOOR
City-St-Zip: SAN FRANCISCO, CA 941052708

Title: VPT () Delete
Name: LUCIANO, WILLIAM
Address: 525 MARKET STREET, 32ND FLOOR
City-St-Zip: SAN FRANCISCO, CA 941052708

Title: P () Delete
Name: NORRIS, ROBIN
Address: 960 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: AS () Delete
Name: SUZUKI, DAVID A
Address: 525 MARKET STREET, 32ND FLOOR
City-St-Zip: SAN FRANCISCO, CA 941052708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ZACHARIA, MICHAEL E
Address: 4005-8 ONE EXCHANGE SQUARE
City-St-Zip: CENTRAL, HONG KONG, 00 00000

Title: D (X) Change () Addition
Name: BRENNAN, EDWARD J
Address: 4005-8 ONE EXCHANGE SQUARE
City-St-Zip: CENTRAL, HONG KONG, 00 00000

Title: VPT (X) Change () Addition
Name: LUCIANO, WILLIAM
Address: 8052 NW 14TH STREET
City-St-Zip: MIAMI, FL 33126

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBIN NORRIS

P

07/27/2004

Electronic Signature of Signing Officer or Director

Date