FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

4977 TAMIAMI TRAIL EAST NAPLES FL 33962 4977 TAMIAMI TRAIL EAST NAPLES FL 33962	4633 7410410 7640 7463	

FILED Jan 16 1998 8:00am Secretary of State

	MENT # P95000 TAINMENT CRUISES, INC.	0031731 (9)		† 40 0 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Plac	e of Business	Mailing Address			
4977 TAMIAMI TRAIL EAST 4977		4977 TAMIAMI TRAIL E	AST		
NAPLES FL 33962		NAPLES FL 33962		50 1107 1107	
				3. Date Incorporated or Qualified	IN THIS SPACE
				The state of the s	
2. Principal F	lace of Business	2a. Mailing Address		04/20/1995 4. FEI Number	Applied For
21		26		65-0591621	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27				o, Certificate of Status Desired	Fee Required
<u> </u>		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 7 p	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation owes or has pa Personal Property Tax due June	
	9. Name and Address of Curren		1901	10. Name and Address of New Re	A
HE	SSON, WAYNE K	· · · · · · · · · · · · · · · · · · ·	81 Name		- /
5091 TAMIAMI TRAIL EAST			82 Street Ad	ddress (P.O. Box Number is Not Acceptat	(ala
NAPLES FL 33962			1 497	7 TAMIAMI TR EAST	, ne)
			83		
			84 Citva	-1	85 Zip Code
			TVAI	0105	FL 3 <i>µ11</i> 2
office or ragent. Fa	I NAUWE K. HEG	GON Reportable (N	authorized by the corporative Statutes. Sec 1 18. Registered sgent signature re	orporation submits this statement for the pration's board of directors. I hereby acceptions the reinstains of the properties of the proper	1/7/98
TITLE	D	DELETE	11 DILE	ADDITIONS/OFFAINGES TO OFFIC	Change Addition
NAME	HESSON, WAYNE		1.2 NAME		
STREET ADDRESS	5091 TAMIAMI TRAIL E.		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 33962		1.4 City-St-ZIP		
TITLE		☐ DELFTE	21 THILE		Change Addition
NAME			2.2 NAME		1
STREET ADDRESS			2.3 STREET ADDRESS		ļ
CITY-ST-ZIP		- December	2. 4 CITY - \$1 - 7IP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME expect abouted			3.2 NAME		
STREET ADDRESS			3.3 STREFT ADDRESS 4		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		orange register
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - 7IP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DFLETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREE1 ADDRESS			6 3 STHEET ADDRESS		
CITY-ST-ZIP	artify that the information supplied wi	th this Olive does not smaller	64 CITY-ST-ZIP	in Contine 110 07/3Vi) Florida Ctatulas I	

r nereovicency user use information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied annual 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 faceiver or tristing 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 another particular and the corporation of the production of the production of the corporation of the production of the corporation of the production of the corporation of the corporation of the corporation of the production of the corporation of the corporation of the production of the corporation of the corporation