2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2002 8:00 AM
Secretary of State

DOCUMENT# P96000089969

Entity Name: THE CRUISE LINE, INC.

Current Principal Place of Business:

150 N.W. 168TH STREET
SUITE 200
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

Current Mailing Address:

150 N.W. 168TH STREET
SUITE 2000
NORTH MIAMI BEACH, FL 33169

New Mailing Address:

FEI Number: 75-2675436 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: BLOODWORTH, JOHN M
Address: 220 CONGRESS PARK DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP ( ) Delete
Name: SHEROTA, JEFFREY
Address: 150 N.W. 168TH STREET, STE. 200
City-St-Zip: NORTH MIAMI BEACH, FL 33169

Title: DVAS ( ) Delete
Name: DOYLE, PATRICK
Address: 220 CONGRESS PARK DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPAS ( ) Delete
Name: DEL PINO, GEORGE
Address: 220 CONGRESS PARK DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VP ( ) Change (X) Addition
Name: KLOTZ, IRWIN (DOC)
Address: 220 CONGRESS PARK DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

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: PATRICK DOYLE VP 04/15/2002

Electronic Signature of Signing Officer or Director Date