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

DOCUMENT # P96000095840 (0)

CREATIVE CRUISES USA, INC.

FILED Jan 22 1998 8:00am Secretary of State



D. . 11 .008

| Principal Place | of Business | Mailing Address | | | TILD EDLOY DIEBY IGSAL DIONI GOLI 1001 |
|---|--|--------------------------------|--------------------------------|--|--|
| 1701 CORAL | GARDENS OR | 1701 CORAL GARDENS DR | | | |
| WILTON MANORS FL 33334 | | WILTON MANORS FL 33334 | | | |
| | | | | DO NOT WRITE IN | THIS SPACE |
| | | | | 3. Date Incorporated or Qualified | |
| B. Dringing D | ace of Business | 2a. Mailing Address | | 11/21/1996 4. FEI Number | 1 4 |
| | N.E. 28TD ST. 4 703 | 26 3250 N.E. 28 | TOST HONB | 65-0712094 | Applied For Not Applicable |
| 21 3250 Sulte, Apt. | | Suite, Apt. #, etc. | 511470 | | CD 75 A 188 |
| 22 | # 703 | 27 4703 | | 5. Certificate of Status Desired | Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 FT. L | AUD, FL | 28 FT. LAUD. | FL | Trust Fund Contribution | |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid to | he current year Intangible |
| 24 333 | 08 25 USA | 29 3 3 3 6 8 | 30 USA | Personal Property Tax due June 30. | |
| | 9. Name and Address of Current i | Registered Agent | | 10. Name and Address of New Regis | ered Agent |
| MUSKAS, LOUISE A 81 Name | | | | | |
| 1701 CORAL GARDENS DR 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| WILTON MANORS FL 33334 3250 NOE, 28TST, H 103 | | | | | |
| | | | 63 | | |
| | | | 84 City | | FI 85 Zip Code D |
| | | | B4 CITY. | LAUDERDALE | FL 33308 |
| 11. Pursuant t | o the provisions of Sections 607.0502 | and 607.1508, Florida Statutes | s, the above-named co | orporation submits this statement for the purp | ose of changing its registered |
| agent. Lar | n familiar with, and accept the obligati | ons of, Section 607.0505, Ffor | ida Statutes. | ration's board of directors. I hereby accept the | le appointment as registered |
| SIGNATURE | | | | | |
| | Signature, typod or printed name of registered against | | Registered Agent signature req | | DATE |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICER | |
| TITLE | D | ☐ DELETE | 1.1 30LE | • | Change Addition |
| NAME | MUSKAS, LOUISE A | | 1.2 NAME | A FO MIS DETA ST 4 | 1003 |
| STREET ADDRESS | 1701 CORAL GARDENS DR | | 1.3 STREET ADDRESS | 1250 N.E. 28TL ST & TILAUD. FL 33308 | , 107 |
| CITY-ST-ZIP | WILTON MANORS FL 33334 | DELETE. | 1.4 CITY - ST - ZIP | TILAUD. FL 33308 | C Observed To A Lordon |
| TITLE | | ☐ DELET E | 2.1 THILE | | Change Addition |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | Daniere | 2.4 CITY - ST- ZIP | | [] 01 [] 1.22° |
| TITLE | | [_] DELETE | 3.1 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | <u> </u> | DELETE | 3.4. CITY-ST-ZIP | | Ohana I Jare |
| TATLE | | ☐ DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | <u> </u> | T Seiete | 4.4 CITY-ST-ZIP | | □ Observe □ 4 x 20x3 |
| TITLE | | ☐ DELETE | 5.1 TITLE | | Change Addition |
| NAME | - | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | T per eve | 5 4 CITY - ST - ZIP | | |
| TITLE | | ☐ DELETE | 6 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 63 STREET ADDRESS | | |
| CITY-ST-ZIP | | W 1 (FF) : 67 (| 6 4 CITY-ST-ZIP | | |
| 14. I 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 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 in | | | | | |
| Block 12 or Block 13 if changed, or on an attachment with an address. | | | | | |