PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT # P98000023753 1. Corporation Name ALL AMERICAN CRUISE & TRAVEL, INC. | | | 1 244 1/40) FFE 1/414 1/4 | | | |
|--|--|--|---|--|--|--------------------------------------|
| Principal Place of Business Mailing Address 245 N COURTNEY PKWY MERRITY ISLAND FL 32953 MERRITT ISLAND FL 32953 | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | 3. Date Incorporated or Qualifed 03/12/1998 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | ~ ~ | 59=350/6422 | | plied For |
| 21 | | 26 | | 37-3306982 | | ot Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | Additional equired |
| 22 | | - City & State | | 8; Election Campaign Financing | \$5.00 | May Be |
| City & Stat | | 28 | • | Trust Fund Contribution | T | to Fees |
| Zip Zip | Country | Zip | Country | 8. This corporation owes the curre | | |
| 24 | 25 | ⊢ • | 30 | Personal Property Tax. | Yes | □No |
| | 9. Name and Address of Current | | | 10. Name and Address of New Ro | egistered Agent | |
| | | | 81 Name | - | | |
| | AAS, JEANNETTE | | 82 Street Add | less (P.O. Box Number is Not Acceptab | ole) | |
| | N COURTNEY PKWY | | DE SUBGRAGO | TOUS (F.C. DOX PERIOD) IS NOT NOT DEP | | |
| ∫ MEF | RRITT ISLAND FL 32953 | | 83 | | | Į |
| 1 | | | 841 City | | 85 Zip | Code |
| | | | 1-1-3 | | FL i i | 1 |
| dd Diversions | to the amplicions of Sections 607.0500 | 2 and 607 1509 Eladida Statutes | the above-named corr | noration submits this statement for the p | surpose of changing its | registered |
| i ii. Pursuant | In the bidateous of Secrois on focus | z aliu oor . 1500, i koriua Statules | the management of the same and | ion's bened of discretors I horsely accomp | the appointment as re | mistered I |
| office or a | registered agent, or both, in the State of | of Floride, Such change was aut tions of, Section 607.0505, Florid | thorized by the corporati da Statutes. | poration submits this statement for the points board of directors. I hereby accept | the appointment as re | gistered |
| agent, ra | registered agent, or both, in the State of the philipse of agent, or both, in the State of the philipse of the | Mas / | gg Calaicas, | <u></u> | 1-27-99 | egistered |
| office or a egent, I a SIGNATURE | Signature, typed or printed name of registered agent | Was (NOTE: F | tegistered Agent signature require | ed when reinstating) | 1-27-99 DATE | <u> </u> |
| SIGNATURE | Stricture, typed or printed name of registered agent | I and the Wappicable. (NOTE: F | tegistered Agent agreeture require | <u></u> | 1-27-99 DATE ICERS AND EXIRECTS | ORS IN 12 |
| SIGNATURE 12. TITLE | Styfulus prine: name of registered grant OFFICERS AN | T AND USE IT APPLICATION (NOTE: R | Egistered Agent signature require 13. 1.1 TITLE | ed when reinstating) | 1-27-99 DATE | <u> </u> |
| SIGNATURE 12. TITLE | Styfulus prine: name of registered grant OFFICERS AN | T AND USE IT APPLICATION (NOTE: R | Englistered Agent agneture require 13. 1.1 TITLE 12 NAME | ed when reinstating) | 1-27-99 DATE ICERS AND EXIRECTS | ORS IN 12 |
| SIGNATURE 12. TITLE | Styfulus prine: name of registered grant OFFICERS AN | T AND USE IT APPLICATION (NOTE: R | Tagestered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS | ed when reinstating) | 1-27-99 DATE ICERS AND EXIRECTS | ORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZP | Stricture, typed or printed name of registered agent | t and the II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE AS PKWS DELETE AS PKWS | ingistered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP | ed when reinstating) | I-3799 DATE EICERS AND INRECTO | ORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE | Styfulus prine: name of registered grant OFFICERS AN | T AND USE IT APPLICATION (NOTE: R | ingistered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP 2.1 TITLE | ed when reinstating) | 1-27-99 DATE ICERS AND EXIRECTS | ORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | Supplies, typed or printed name of registeredgement of the supplies of the sup | t and the II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE AS PKWS DELETE AS PKWS | ingistered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP 2.1 TITLE 22 NAME | ed when reinstating) | I-3799 DATE EICERS AND INRECTO | ORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Supplies, typed or printed name of registeredgement of the supplies of the sup | t and the II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE AS PKWS DELETE AS PKWS | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS | ed when reinstating) | I-3799 DATE EICERS AND INRECTO | ORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Supplies, typed or printed name of registeredgement of the supplies of the sup | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS A PKwy DFL 3253 DELETE | ingistered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP 2.1 TITLE 22 NAME | ed when reinstating) | I-3799 DATE EICERS AND INRECTO | ORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Supplies, typed or printed name of registeredgement of the supplies of the sup | t and the II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE AS PKWS DELETE AS PKWS | iagistered Agent signeture require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME | Stiplure, hybed or printe: name of registered gent OFFICERS AN PRESIDENT JEANNETTE DU 245 N. COURTER MERRITT ISLAND | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | indistance Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Stiplure, hybed or printe: name of registered gent OFFICERS AN PRESIDENT JEANNETTE DU 245 N. COURTER MERRITT ISLAND | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | ingistered Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP | Stiplure, hybed or printe: name of registered gent OFFICERS AN PRESIDENT JEANNETTE DU 245 N. COURTER MERRITT ISLAND | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | indistance Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Stiplure, hybed or printe: name of registered gent OFFICERS AN PRESIDENT JEANNETTE DU 245 N. COURTER MERRITT ISLAND | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | iagistered Agent signeture require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIP | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | Stiplure, hyped or printed name of registered general printed gen | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | indistance Agent signature require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | Stiplure, hyped or printed name of registered general printed gen | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME | ed when reinstating) | DATE CERS AND INRECTOR Change Change | DRS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | Stiplure, hyped or printed name of registered general printed gen | t and title if applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 CITY- ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY- ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | ed when reinstating) | DATE HICERS AND INRECTO Change | ORS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Stiplure, hyped or printed name of registered general printed gen | Trand Wile II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ed when reinstating) | DATE CERS AND INRECTOR Change Change | DRS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Supplure, hyped or printed name of registered again. OFFICERS AN PRESIDENT JEANNETE Du 245 N. COURTEN MERRITT ISLAND | Trand Wile II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | ed when reinstating) | DATE CERS AND INRECTOR Change Change | DRS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Supplure, hyped or printed name of registered again. OFFICERS AN PRESIDENT JEANNETE Du 245 N. COURTEN MERRITT ISLAND | Trand Wile II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ed when reinstating) | DATE ICERS AND IMPRECTO Change Change Change | DRS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME | Supplure, typed or printer name of registered general printers. AND TERM NETT DUE 245 N. COURTER MERRITT ISLAND | Trand Wile II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE | Agent agunture require 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 8.1 TITLE 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 8.1 TITLE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 8.1 TITLE | ed when reinstating) | DATE CERS AND INRECTOR Change Change | DRS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Supplure, typed or printer name of registered general printers. The printer name of registered general printers. TEANNETE DU 245 N. COURTER MERRITT ISLAND | Trand Bille II applicable. (NOTE: F D DIRECTORS DELETE MAS AS PKWS DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ed when reinstating) | DATE ICERS AND IMPRECTO Change Change Change | DRS IN 12 Addition Addition Addition |

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 orith; 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 chapted, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Apr 13, 1999 8:00 am Secretary of State 04-13-1999 90064 017 ***150.00