

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005618

Entity Name: MAGICAL CRUISE COMPANY, LIMITED**Current Principal Place of Business:**3 QUEEN CAROLINE STREET
HAMMERSMITH
LONDON, W6 9PE**Current Mailing Address:**500 S BUENA VISTA ST
BURBANK, CA 91521-0105**FEI Number:** 59-3403765**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GIACALONE, MARGARET C
1375 BUENA VISTA DRIVE
4TH FLOOR NORTH
LAKE BUENA VISTA, FL 32830 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY, DIRECTOR
Name	SWETS, EGBERT
Address	210 CELEBRATION PLACE 4TH FLOOR
City-State-Zip:	CELEBRATION FL 34747

Title	DIRECTOR, TREASURER
Name	DIERCKSEN, WILLIAM
Address	210 CELEBRATION PLACE 4TH FLOOR
City-State-Zip:	CELEBRATION FL 34747

Title	DIRECTOR, PRESIDENT
Name	VAHLE, JEFFREY N
Address	210 CELEBRATION PLACE
City-State-Zip:	CELEBRATION FL 34747

Title	TREASURER
Name	GOMEZ, CARLOS A
Address	500 S BUENA VISTA ST
City-State-Zip:	BURBANK CA 91521-0105

I hereby 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 all other like empowered.

SIGNATURE: EGBERT SWETS**SECRETARY****04/30/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date