

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000005618

1. Corporation Name

MAGICAL CRUISE COMPANY, LIMITED

Principal Place of Business

3 QUEEN CAROLINE ST  
HAMMERSMITH  
LONDON EN W69PE  
US

Mailing Address

500 S. BUENA VISTA ST.  
BURBANK CA 91521-0586  
US

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90205 004 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/29/1996

4. FEI Number

59-3403765

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3 QUEEN CAROLINE STREET

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 HAMMERSMITH

27

City & State

City & State

23 LONDON W6 9PE, ENGLAND

28

Zip

Country

Zip

Country

24

25

UK

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

IOPPOLO, FRANK S  
1375 BUENA VISTA DR, 4TH FLOOR NORTH  
LAKE BUENA VISTA FL 32830

81 Name

82 Street Address (P. O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME DAVIES, SALLY  
STREET ADDRESS BEAUMONT HOUSE/KENSINGTON VILLAGE  
CITY-ST-ZIP LONDON W14 8TS ENGLAND

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D ☐ DELETE  
NAME D  
STREET ADDRESS BEAUMONT HOUSE/KENSINGTON VILLAGE  
CITY-ST-ZIP LONDON W14 8TS ENGLAND

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE SD ☒ DELETE  
NAME SMITH, JEFFREY H  
STREET ADDRESS 1375 BUENA VISTA DR  
CITY-ST-ZIP LAKE BUENA VISTA FL 32830

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE PD ☐ DELETE  
NAME RODNEY, ARTHUR A  
STREET ADDRESS 210 CELEBRATION PLACE, SUITE 400  
CITY-ST-ZIP CELEBRATION FL 34747

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VT ☐ DELETE  
NAME MCALPIN, THOMAS  
STREET ADDRESS 210 CELEBRATION PLACE  
CITY-ST-ZIP CELEBRATION FL 34747

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE AS ☐ DELETE  
NAME REED, MARSHA L  
STREET ADDRESS 500 S. BUENA VISTA ST.  
CITY-ST-ZIP BURBANK CA 91521

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ 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 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, with all other like empowered.

SIGNATURE:

MARSHA L. REED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(818) 560-1000

Daytime Phone #

CR2E034 (11/98)