No. C 167438		Due no later than Jun 30, 2017		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND AND AND ADDRESS OF THE PARTY OF THE PART	C T CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.		NO. 11 CONTRACTOR NO. 1 CONTRACTOR NO. 1000 CO.	921 S ORCHARD ST STE G BOISE ID 83705			
		INTERNATIONAL CRUISE & EXCURSION GALLERY, INC. 15501 N. DIAL BLVD. SCOTTSDALE AZ 85260		BOISE ID 63	BOISE ID 63703			
				3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter N	Names and Busin	ess Addresses	of President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	MARCIA RO		15501 N. DIAL BLVD.	SCOTTSDALE	AZ	USA	85260	
SECRETARY			15501 N. DIAL BLVD.	SCOTTSDALE	ΑZ	USA	85260	
PRESIDENT			15501 N. DIAL BLVD.	SCOTTSDALE	ΑZ	USA	85260	
DIRECTOR	JOHN ROWL	EY	15501 N. DIAL BLVD.	SCOTTSDALE	AZ	USA	85260	
5. Organized Under the Laws of:		6. Annual Rep	port must be signed.*					
DE		Signature: Kelly Lettmann			Date: 05/08/2017			
C 167438		Name (type or print): Kelly Lettmann			Title: POA			
Processed 05/08/2017		* Electronically	y provided signatures are accepted as original	signatures.				