

1.) CORPORATION NAME:

**CARNIVAL CORPORATION**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS, INC.  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **F1763038**

**GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,959,999,998
PREFER	40,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**FN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3655 N.W. 87 AVE  
MLGL-815

CITY/ST/ZIP: MIAMI, FL 33178

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	LARRY FREEDMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CAO & VP		
ADDRESS:	3655 NW 87TH AVENUE		
CITY/ST/ZIP/CO:	MIAMI, FL 33178		

NAME:	ARNALDO PEREZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SRVP-LEGAL/GC/S		
ADDRESS:	3655 NW 87 AVENUE		
CITY/ST/ZIP/CO:	MIAMI, FL 33178		

NAME:	MICKY ARISON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	3655 N W 87 AVENUE		
CITY/ST/ZIP/CO:	MIAMI, FL 33178		

NAME:	HOWARD S FRANK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	3655 N W 87 AVE		
CITY/ST/ZIP/CO:	MIAMI, FL 33178-0008		

NAME:	DAVID BERNSTEIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP & CFO		
ADDRESS:	3655 NW 87TH AVENUE		
CITY/ST/ZIP/CO:	MIAMI, FL 33178		

NAME:	SIR JONATHON BAND	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3655 NW 87TH AVENUE		
CITY/ST/ZIP/CO:	MIAMI, FL 33178		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ARNOLD W. DONALD CEO 3655 NW 87TH AVENUE MIAMI, FL 33178	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PIER LUIGI FOSCHI DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD J. GLASIER DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBRA KELLY-ENNIS DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SIR JOHN PARKER DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STUART SUBOTNICK DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAURA WEIL DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RANDALL J. WEISENBURGER DIRECTOR 3655 NW 87TH AVENUE MIAMI, FL 33178	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ ARNALDO PEREZ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ARNALDO PEREZ, SRVP- LEGAL/GC/S PRINTED NAME AND CORPORATE TITLE	7/5/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			