

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**APPLICATION FOR REINSTATEMENT**

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

FILED

00 OCT 25 PM 4: 57

**DOCUMENT # F92000000870**

1. Corporation Name

**CRUISING WORLD PUBLICATIONS, INC.**

Principal Place of Business      Mailing Address

5 JOHN CLARKE RD  
 NEWPORT RH 02840-5641  
 US

C/O 229 W 43RD STREET  
 LEGAL DEPT.  
 NEW YORK NY 10036  
 US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/22/1992	
City & State		City & State		5. FEI Number	
Zip		Country		05-0408776	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
<del>OPD</del>	<del>FITZGERALD, JAMES W</del>	<del>5520 PARK AVENUE</del>	<del>TRUMBULL CT 06011</del>
<del>D</del>	<del>DARROW, KATHARINE P</del>	<del>229 WEST 43RD STREET</del>	<del>NEW YORK NY 10036</del>
<del>DS</del>	<del>CORWIN, LAURA J</del>	<del>229 WEST 43RD STREET</del>	<del>NEW YORK NY 10036</del>
<del>T</del>	<del>TAUS, ELLEN</del>	<del>229 W 43RD ST</del>	<del>NEW YORK NY 10036</del>
V	LEVITT, KEITH	5520 PARK AVENUE	TRUMBULL CT 06611
AS	BRAUER, RHONDA	229 W 43RD ST	NEW YORK NY 10036

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent		
THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET STE 105 TALLAHASSEE FL 32301	Name		
	Street Address (P.O. Box Number is Not Acceptable)		
	Suite, Apt. #, etc.		
	City	State	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent Laura R. Dunlap as its agent      Date 10/24/00

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

500003439695--7

Date      Daytime Phone #

CR2E040 (8/00)

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ACCOUNT NO. : 072100000032

REFERENCE : 872336 4335509

AUTHORIZATION :

*Patricia Pizuto*

COST LIMIT : \$ 750.00

ORDER DATE : October 23, 2000

ORDER TIME : 3:18 PM

ORDER NO. : 872336-010

CUSTOMER NO: 4335509

CUSTOMER: Kathleen Corey, Corp Paralegal  
THE NEW YORK TIMES COMPANY -  
THE NEW YORK TIMES COMPANY -  
229 West 43rd. Street  
12th Floor  
New York, NY 10036

DOMESTIC FILING

NAME: CRUISING WORLD PUBLICATIONS,  
INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
00 OCT 25 PM 3:54  
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