

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000071907

**FILED**  
**Oct 17, 2013**  
**Secretary of State**

**Entity Name:** FOURTRANS SHIPPING & CHARTERING INC.

**Current Principal Place of Business:**

151 N. NOBHILL RD.  
#106  
PLANTATION, FL 33324

**New Principal Place of Business:**

490 N PIN OAK PL  
#206  
LONGWOOD, FL 32779

**Current Mailing Address:**

151 N. NOBHILL RD.  
#106  
PLANTATION, FL 33324

**New Mailing Address:**

490 N PIN OAK PL  
#206  
LONGWOOD, FL 32779

**FEI Number:** 03-0466508

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ABRAMS, NATHANIEL  
9830 NW 20TH PL  
SUNRISE, FL 33322 US

**Name and Address of New Registered Agent:**

ABRAMS, NATHANIEL  
425 SUMMIT RIDGE PL  
#107  
LONGWOOD, FL 32779 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: NATHANIEL ABRAMS

10/17/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ABRAMS, DANIEL  
Address: 490 N PIN OAK PL #206  
City-St-Zip: LONGWOOD, FL 32779

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: DANIEL ABRAMS

P

10/17/2013

Electronic Signature of Signing Officer or Director

Date