

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000022292

**FILED**  
**May 05, 2011**  
**Secretary of State**

**Entity Name:** FRIENDS & FAMILY DISCOUNT TRAVEL, INC.

**Current Principal Place of Business:**

13218 W.DIXIE HWY  
NO. MIAMI, FL 33161

**New Principal Place of Business:**

1199 NE 139 STREET  
NO. MIAMI, FL 33161

**Current Mailing Address:**

3730 S.W. 46TH AVENUE  
WEST PARK, FL 33023

**New Mailing Address:**

3211 S.W. 32 TH AVENUE  
WEST PARK, FL 33023

**FEI Number:** 56-2561249

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAMEAU, SHEILA  
3730 SW 46TH AVENUE  
WEST PARK, FL 33023 US

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

CAMEAU, SHEILA C  
3211 SW 32 TH AVENUE  
WEST PARK, FL 33023 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:** SHEILA C CAMEAU

05/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D/PS  
**Name:** CAMEAU, SHEILA PRS.  
**Address:** 3211 SW 32 TH AVENUE  
**City-St-Zip:** HOLLYWOOD, FL 33023 US

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:** SHEILA C CAMEAU

OWN

05/05/2011

Electronic Signature of Signing Officer or Director

Date