

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000063155

Entity Name: CRUISE OPTIONS, INC.

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1860 N. PINE ISLAND RD.  
SUITE 115  
PLANTATION, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

10131 NW 10 ST  
PLANTATION, FL 33322

**New Mailing Address:**

FEI Number: 65-0778423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OPERT, MARTIN  
10131 NW 10 ST  
PLANTATION, FL 33322 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: COOPERSMITH, SHERYL  
Address: 10131 NW 10 ST  
City-St-Zip: PLANTATION, FL 33322

Title: T  
Name: OPERT, MARTIN  
Address: 10131 NW 10 ST  
City-St-Zip: PLANTATION, FL 33322

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: MARTIN OPERT

T

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date