

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000021610

**Entity Name:** CRUISES PLUS/FORT MYERS INC

**FILED**  
**Apr 18, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

16243 CHARLESTON AVENUE.  
FT. MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

16243 CHARLESTON AVENUE.  
FT. MYERS, FL 33908

**New Mailing Address:**

FEI Number: 65-0901290      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SPINA, RICHARD M  
16243 CHARLESTON AVENUE  
FT. MYERS, FL 33908 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: RICHARD M. SPINA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: SPINA, RICHARD M  
Address: 16243 CHARLESTON AVENUE  
City-St-Zip: FT. MYERS, FL 33908

Title: D  
Name: SPINA, RICHARD M  
Address: 16243 CHARLESTON AVENUE  
City-St-Zip: FT. MYERS, FL 33908

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: RICHARD M. SPINA

Electronic Signature of Signing Officer or Director

PRES

04/18/2013

Date