

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

03-12-2007 90483 014 ****50.00
~~08-30-2007 90066 028 ****50.00~~
 L06000057129

DOCUMENT # L06000057129

1. Entity Name
UNITED CRANE & RIGGING, LLC



Principal Place of Business 2500 HOLLYWOOD BLVD., STE. 212 HOLLYWOOD, FL 33020	Mailing Address 2500 HOLLYWOOD BLVD., STE. 212 HOLLYWOOD, FL 33020
--	--

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

07 OCT 19 11 18:19
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

08212007 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-497269

5. Certificate of Status Desired \$5.00 Additional Fee Required



6. Name and Address of Current Registered Agent

**KLAPHOLZ, JOSEPH P ESQ.
 % MANELLA & KLAPHOLZ
 2500 HOLLYWOOD BLVD., STE. 212
 HOLLYWOOD, FL 33020**

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

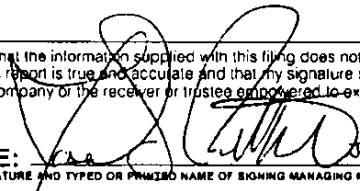
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent's signature required when re-registering) DATE

Filing Fee is \$50.00 Due by September 14, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		Mgr M MEMBER ROBERTSON, JAMES 5954 NW 74TH TERRACE PARKLAND, FL 33067	
		Mgr M MEMBER RETTERRATH, STEVE 1241 ROYAL PALM WAY BOCA RATON, FL 33432	
		Mgr M MEMBER RETTERRATH, JASON 1070P EL PARAISO PL DELRAY BEACH, FL 33432	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **JASON RETTERRATH** **8/21/07** **954-973-3070**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date (Daytime Phone #)