

# FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 02, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000065829

1. Entity Name

PRECISION CRANE & RIGGING, INC.



Principal Place of Business

2500 HOLLYWOOD BLVD SUITE 212  
HOLLYWOOD FL 33020

Mailing Address

2500 HOLLYWOOD BLVD SUITE 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

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number **65-1121114**

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~KLAPHOLZ, JOSEPH P~~  
C/O MANELLA & KLAPHOLZ  
2500 HOLLYWOOD BLVD SUITE 212  
HOLLYWOOD FL 33020

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PVST  Delete  
NAME: RETTERATH, ANDREW  
STREET ADDRESS: 2500 HOLLYWOOD BLVD SUITE 212  
CITY- ST- ZIP: HOLLYWOOD FL 33020

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY- ST- ZIP:  Change  Addition

TITLE: VP  Delete  
NAME: CROSBY, RICHARD  
STREET ADDRESS: 14488 HORSESHOE TR  
CITY- ST- ZIP: WELLINGTON FL 33414

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY- ST- ZIP:  Change  Addition

TITLE:  Delete  
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STREET ADDRESS:  Delete  
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STREET ADDRESS:  Change  Addition  
CITY- ST- ZIP:  Change  Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Andrew Retterath  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-07

Date

Daytime Phone #