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COR	PROFIT		RTMENT OF STATE	Apr 22 1	998 8:	00an
		Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
	1998					orace
Corporation	MENT # 280898	8 (8)				
FLORID	A RIGGING & CRANE COM	MPANY INC				
rincipal Place	e of Business	Mailing Address		I LUDIIU MUDIIUIRIUUIUUUUUUUUUUUUUUUUUUUUUUUUUUUU	UU 1101) UUU UUU UUU UUU U	1815 81811 1881
P. O. BOX 68 P.O. BOX 680		P. O. BOX 680-579 P.O. BOX 680579				
MIAMI FL 33168 US		MIAMI FL 33168 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
				04/28/1964		
Principal Pl	ace of Businoss	28. Mailing Address 26		4. FEI Number 59-1058759		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	+	Additional Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00	D May Be
Zıp	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation owes or has pa		to Fees ntangible
l	25 9. Name and Address of Currer	29 Dt Begletered Agent	30	Personal Property Tax due June 10. Name and Address of New Re	9 30. 🛛 Yes	No No
BA	RTHET PATRICK, C ESO		81 Name			
200	D S,. BISCAYNE BLVD		82 Street Add	dress (P.O. Box Number is Not Accepta	ble)	
	ITE 1800		83			
MM	AMI FL 33131		63			
MI/	AMI FL 33131		84 City		E 1 85 Zir	Code
		2 and 607.1509, Florida Statut	84 City	poration submits this statement for the	FL	
Pursuant I office or re		2 and 607.1509, Florida Statut of Florida. Such change was ations of, Section 607.0505, Fl	84 City es, the above-named cor authorized by the corpora	poration submits this statement for the ation's board of directors. I hereby acce	FL	
 Pursuant I office or ri agent. I ar IGNATURE 	to the provisions of Sections 607.050 egistored agent, or both, in the State m familiar with, and accept the oblig Signature, typod or printed name of registered age	ations of, Soction 607.0505, Fl	B4 City B4 City authorized by the corpora orida Statutes. Englistered Agent signature requ	sired when reinslating)	purpose of changing pt the appointment a	its registered s registered
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