## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

MIAMI FL 33178



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 474880

(2)

KIPP CRANE SERVICE, INC.

Principal Place of Business Mailing Address
11320 NW 138 ST 11320 NW 138 ST

MIAMI FL 33178

FILED Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

							3. Date Incorporated or Qualified			
									04/29/1975	
2. Principal P	ace of Busin	ness	2a. N	2a. Mailing Address					4. FEI Number Applied For	
21				26					59-1593814 Not Applicable	
Suite, Apt.	#, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
22			27	27					5. Certificate of Status Besiled Fee Required	
City & State	•			City & State					6. Election Campaign Financing \$5.00 May Be	
23			28						Trust Fund Contribution	
Zip		Country	<del> </del> 7	Zip Cou			or this disponantial of the part the during your		8. This corporation owes or has paid the current year Intangible	
24		25	29				Personal Property Tax due June 30. 🔀 Yes 🗌 No			
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent			
KIPP, RICHARD L. SR.							81 Name			
11320 NW 138 ST						82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 321										
M!/	AMI FL 331	178					83			
						84	84 City		85 Zip Code	
							-	•		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered										
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
SIGNATORE	Signature, typed	or printed name of registered age	nt and title if a	applicable, (NO)	TE, Regist	tered Agi	ent siç	nature requir	red when reinstating) DATE	
12.		OFFICERS AND	DIRECT		1	3.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD			☐ DELETE	1.	1 TITLE			Change Addition	
NAME	KIPP SR, RICHARD L					1.2 NAME				
STREET ADDRESS	14830 I			1.3 STF			RESS			
CITY-ST-ZIP	MIAMI I	AKES, FL 00000			4 CITY - S	ST-ZIF	,			
TITLE	ST		,	DELETE 2.1 TI			TITLE		Change Addition	
NAME	KIPP, A	NN			2.2 NA					
STREET ADDRESS	14830 L	LEWIS ROAD			2.3 \$1			RESS		
CITY-ST-ZIP	MIAMI L	"AKES, FL 00000		2. 4 (			2. 4 CITY-ST-ZIP			
TITLE	VD	DELETE	3.	3.1 TITLE			Change Addition			
NAME	KIPP JF		3.	3.2 NAME						
STREET ADDRESS	14520 H		3.3 STREET ADDI			RESS				
CITY-ST-ZIP	DAVIE F		3.4. CITY-ST-ZIP			P				
TITLE	D	DELETE	_	1 TITLE			Change Addition			
NAME	KIPP, A	NN			4.	2 NAME				
STREET ADDRESS						3 STREET		RESS		
CITY-ST-ZIP	1 H 4 1 H 1 H 1 TO TI 00000					4.4 CITY-ST-ZIP				
TITLE	111111111111111111111111111111111111111			DELETE		1 TITLE			Change Addition	
NAME					5.	2 NAME				
STREET ADDRESS						3 STREET	T ADDI	RESS		
CITY-ST-ZIP						5.4 CITY-ST-ZIP				
TITLE						6.1 TITLE			☐ Change ☐ Addition	
NAME						2 NAME			_ · · _	
STREET ADDRESS					ı	3 STREET		RESS		
1 1						4 CITY-S		- 1		
CITY-ST-ZIP	ertify that the	e information supplied w	ith this filli	na does not qualify f					Section 119.07(3)(i), Florida Statutes, I further certify that the information	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

NINTER WARED

305-820-0300

CH2E034 (10/9