2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #474880

KIPP CRANE SERVICE, INC.



FILED Apr 12, 2007 08:00 A Secretary of State

Principal Place of Business

11320 NW 138 ST MIAMI, FL 33178

Mailing Address

11320 NW 138 ST MIAMI, FL 33178 US



DO NOT WRITE IN THIS SPACE

01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1593814

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KIPP, RICHARD L. SR. 11320 NW 138 ST **SUITE 321** MIAMI, FL 33178

PD

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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.

10.

TITLE

NAME

STREET ADDRESS CITY-\$1-2:P

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

KIPP SR, RICHARD L

14830 LEWIS ROAD

HIALEAH, FL 33014

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

ST KIPP, ANN *U*00000701085 04/20/07-80043-009 150.00 14830 LEWIS ROAD HIALEAH, FL 33014

TITLE NAME STREET ADDRESS CITY-ST-ZIP VD TITLE NAME KIPP JR, RICHARD L STREET ADDRESS 14520 HAMPTON PL. CITY-ST-ZIP FORT LAUDERDALE, FL 33325 TITLE NAME KIPP, ANN STREET ADDRESS 14830 LEWIS RD CITY-ST-ZIP HIALEAH, FL 33014 TITLE NAME STREET ADDRESS

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12. 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 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. (305)

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

Richard L Kipp Jr

3/27/07

820-0300

Daytime Phone #