

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90053 011 ***150.00

DOCUMENT # 474880

1. Entity Name
KIPP CRANE SERVICE, INC.



Principal Place of Business

**11320 NW 138 ST
MIAMI, FL 33178 US**

Mailing Address

**11320 NW 138 ST
MIAMI, FL 33178 US**

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

02062008

Chg-P

CR2E034 (12/06)

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**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	KIPP SR, RICHARD L	
STREET ADDRESS	14830 LEWIS ROAD	
CITY-ST-ZIP	HIALEAH, FL 33014	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	KIPP, ANN	
STREET ADDRESS	14830 LEWIS ROAD	
CITY-ST-ZIP	HIALEAH, FL 33014	
TITLE	VD	<input type="checkbox"/> Delete
NAME	KIPP JR, RICHARD L	
STREET ADDRESS	14520 HAMPTON PL.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33325	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KIPP, ANN	
STREET ADDRESS	14830 LEWIS RD	
CITY-ST-ZIP	HIALEAH, FL 33014	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Theresa Ann Kipp	
STREET ADDRESS	14830 Lewis Road	
CITY-ST-ZIP	Miami Lakes FL 33014	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: Richard L Kipp Jr Richard L Kipp Jr 4/1/08 305-820-0300