

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 614361

Entity Name: MIAMI CRANE SERVICE, INC.

FILED  
Jan 19, 2006  
Secretary of State

**Current Principal Place of Business:**

10400 NW SO. RIVER DR.  
MEDLEY, FL 33178 US

**New Principal Place of Business:**

**Current Mailing Address:**

10400 NW SOUTH RIVER DRIVE  
MEDLEY, FL 33178 US

**New Mailing Address:**

16201 E. TROON CIRCLE  
MIAMI LAKES, FL 33014 US

FEI Number: 59-1931261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EPLING, ROBY JR.  
16201 E. TROON CIRCLE  
MIAMI LAKES, FL 33014 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VS ( ) Delete  
Name: PETERSON, DAWN  
Address: 10400 NW SOUTH RIVER DRIVE  
City-St-Zip: MEDLEY, FL

Title: P ( ) Delete  
Name: EPLING, ROBY J  
Address: 10400 NW SOUTH RIVER DRIVE  
City-St-Zip: MEDLEY, FL

Title: SEC ( ) Delete  
Name: GROSSMAN, GINA M  
Address: 10400 NW SOUTH RIVER DRIVE  
City-St-Zip: MEDLEY, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GINA M. GROSSMAN

SEC

01/19/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date