

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004359

Entity Name: PVE CRANES, INC.

FILED
Jan 21, 2004
Secretary of State

Current Principal Place of Business:

601 BRYAN STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

601 BRYAN STREET
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 30-0016715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLEBAUM, TIM
601 BRYAN STREET
JACKSONVILLE, FL 32202

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: DVP () Delete
Name: SCHLEBAUM, TIM
Address: 601 BRYAN STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVST (X) Change () Addition
Name: SCHLEBAUM, TIM
Address: 601 BRYAN STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: P () Change (X) Addition
Name: BOMER, JOOST
Address: 601 BRYAN STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: V () Change (X) Addition
Name: WEURDERMAN, THOMAS A
Address: 601 BRYAN STREET
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIM SCHLEBAUM

DVST

01/21/2004

Electronic Signature of Signing Officer or Director

Date