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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L05788

SEA COAST CRANE SERVICE, INC.

(9)

Mailing Address

FILED Mar 25 1997 8:00am Secretary of State

11522 STATE RD 84 STE 275 DAVIE FL 33325 US		11522 STATE RD 84 STE 275 Davie Fl 33325-4022 US							
					3. Date Incorporated or Qualified 3a. Date of Last Report 07/31/1989 04/19/1996			port	
2. Principal P 21	ace of Business	2a. Mailing Address				4. FEI Number 65-0135129			olied For Applicable
Scrite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	□ \$	\$8.75 Additional Fee Required	
City & Stat	City & State City & State					Election Campaign Financing     Trust Fund Contribution		5.00 s Added to	
7η) <b>24</b>	Country 25	7(i)				8. This corporation has liability for intangible tax under s. 199.03 Florida Statutes Yes No			
	9. Name and Address of Curren	I Registered Agent				10. Name and Address of New Reg	Istered Ager	nt	
	ROW, TERRY			<b>81</b>   Na	ame				
	51 GOLF CLUB RD., APT. 308 LAUDERDALE FL FL 33326				reet Addr	ress (P.O. Box Number is Not Acceptab	e)		
				83					
				<b>84</b> C	•		FL 85	1	
office or i	to the provisions of Sections 607 050 registered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was a	uthorize	d by the	med corp corporal	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of cha t the appointr	riging its nent as r	registered egistered
SIGNATURE	-								
	for two typical cases to a constraint was stored ago			d Agent sig	nature requi	ired when reinstating)	DATE	FOTOD	
12.	OFFICERS AN	D DIRECTORS  DELETE	13.	T. F	1	ADDITIONS/CHANGES TO OFFIC		Change	Addition
THUE	BARROW, TERRY W.			1.1 TITLE 1.2 NAME				citaly.	
NAME STREET ADDRESS	16251 GOLF CLUB RD, APT 3	06		nivii Tree'i adoi	ocee				
CHTY 51-749	FT LAUDERDALE FL			ITY - ST - 211					
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NAME			2.2 N	AME					
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015Y - ST - ZVC					p				
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• If do 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 understed 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 present 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 12 or Block 13 if Changed, or on an attachment with an address.

SIGNATURE: SIGNATURE: SIGNATURE OF THE CITY SIGNATURE OF CITY OF CHECK OF CHICA OF C