


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company AL'S CRANE SERVICE, L.L.C. 7722 BAYBERRY CT. ORLANDO FL 32810		DOCUMENT # L98000001356		FILED 08 MAY -3 PM 5:00 SECRETARY OF STATE DIVISION OF CORPORATIONS	
2. Principal Place of Business <i>25235 Rolling Oak Rd</i>		2a. Mailing Address		1a. Principal Place of Business Address 25325 ROLLING OAK RD. SORRENTO FL 32776 <i>85235 Rolling Oak Rd.</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3. Date Organized or Qualified 08/05/1998	
City & State		City & State		3a. State of Formation FL	
Zip		Zip		4. FEI Number	
Country		Country		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent CRUZ, VICKIE L 7722 BAYBERRY CT. ORLANDO FL 32810				8. Name and Address of New Registered Agent/Office	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				Suite, Apt. #, etc.	
				City	
				FL	
				Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when liquidating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	SAGERS, LEONARD A	7722 BAYBERRY CT.		ORLANDO FL	
11. I 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 indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: <i>Leonard Sagers</i> 5/1/99 299-6534 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER (MANAGING MEMBER OR MANAGER)</small> <small>Digitize Name</small> (407)					