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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000094029 (3)

JAWS CRANE TRUCK SERVICE, INC.

Principal Place of Business	Mailing Address		e innerinde tid iditt dintit dintit allite fin	
4907 SUNNY LANE AVE	4907 SUNNY LANE AVE			
WEST PALM BEACH FL 33415 US	WEST PALM BEACH FL 33415 US		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified 12/29/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0558221	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has pa	id the current year Intangible
24 25	29	30	Personal Property Tax due June	30. Yes No
g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
WALKER, JEFFREY A		81 Name		
4907 SUNNY LANE AVE		82 Street Ad	Idress (P.O. Box Number is Not Acceptab	le)
WEST PALM BEACH FL 33415		83		·
		63		
		64 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig.	e of Florida. Such chance was	authorized by the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATURE				
Signature, typed or printed name of registered ag		TE: Registered Agent signature rec	·	DATE SERVICE AND DIRECTORS IN 10
Signature, typed or printed name of registered ag  12. OFFICERS AN	ND DIRECTORS	13.	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
Signature, typed or printed name of registered ago  12. OFFICE RS AN  TITLE D		13. 1.1 TITLE	·	
12. OFFICE RS AN  TITLE D  WALKER, JEFFREY A	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	·	ERS AND DIRECTORS IN 12
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14. I 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 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 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 12 or Block 13 if changed, order an attachment with an address.

SIGNATURE:

on an attachment with an address

JEEFFY WALKER

. April ap

**FILED** 

May 01 1998 8:00am

Secretary of State

561-687-7610