

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 08 1998 8:00am  
Secretary of State

DOCUMENT # **P96000010988 (9)**

1. Corporation Name  
**CRANE CARGO SYSTEM, INC.**

Principal Place of Business  
**7801 NW 68 STREET NO. 128  
MIAMI FL 33166**

Mailing Address  
**7801 NW 68 STREET NO. 128  
MIAMI FL 33166**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 **9120 NW 71 ST**

2a. Mailing Address  
26 **9120 NW 71 ST**

3. Date Incorporated or Qualified  
**02/05/1996**

4. FEI Number  
**65-0645618**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

City & State  
23 **MIAMI - FL**

City & State  
28 **MIAMI - FL**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

Zip Country  
24 **33166** 25 **USA**

Zip Country  
29 **33166** 30 **USA**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**REVERON, RAUL  
7801 NW 68 STREET NO. 128  
MIAMI FL 33166**

10. Name and Address of New Registered Agent

81 Name **RAUL REVERON**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**9120 NW 71 ST**  
83  
84 City **MIAMI** FL 85 Zip Code **33166**

11. Pursuant to the provisions of sections 607.0852 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	<b>PD REVERON, RAUL</b>	<b>7801 NW 68 STREET NO. 128</b>	<b>MIAMI FL 33166</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
	<b>PD REVERON RAUL</b>	<b>9120 NW 71 ST</b>	<b>MIAMI, FL 33166</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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, or on an attachment with an address.

SIGNATURE

CR2E034 (5/98)