

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2006 8:00 am
Secretary of State

02-01-2006 90010 050 ***150.00

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1. Entity Name
CARDOSO AND SON CRANE SERVICE, INC.



Principal Place of Business
**10410 N WOODMERE RD
TAMPA, FL 33617**

Mailing Address
**10410 N WOODMERE RD
TAMPA, FL 33617**

60009625



DO NOT WRITE IN THIS SPACE

01162006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3448670

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CARDOSO, MARGARET
10410 N WOODMERE RD
TAMPA, FL 33617**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CARDOSO, ROBERT D
10410 N WOODMERE RD
TAMPA, FL 33617**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CARDOSO, ROBERT D JR
10410 N WOODMERE RD
TAMPA, FL 33617**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CARDOSO, MARGARET
10410 N WOODMERE RD
TAMPA, FL 33617**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert D Cardoso President

✓ 1-23-06

813-988-1500

Date

Daytime Phone #