

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

FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000075411 (3)

1. Corporation Name

MONZON CRANE ASSOCIATES, INC.

Principal Place of Business

11412 SW 4TH STREET
MIAMI FL 33174

Mailing Address

11412 SW 4TH STREET
MIAMI FL 33174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/29/1997

4. FEI Number

65-0778667

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent

CORONADO, RAMONA
7360 CORAL WAY
SUITE 21
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 PD
NAME MONZON, HENRY
STREET ADDRESS 11460 SW 186 STREET
CITY-ST-ZIP MIAMI FL 33157
[] DELETE
TITLE VD
NAME MONZON, ROBERTO
STREET ADDRESS 11412 SW 4TH STREET
CITY-ST-ZIP MIAMI FL 33174
[] DELETE
TITLE SD
NAME MONZO, HENRY
STREET ADDRESS 11460 SW 186 STREET
CITY-ST-ZIP MIAMI FL 33157
[] DELETE
TITLE [] DELETE
NAME [] DELETE
STREET ADDRESS [] DELETE
CITY-ST-ZIP [] DELETE
TITLE [] DELETE
NAME [] DELETE
STREET ADDRESS [] DELETE
CITY-ST-ZIP [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [] Change [] Addition
1.2 NAME [] Change [] Addition
1.3 STREET ADDRESS [] Change [] Addition
1.4 CITY-ST-ZIP [] Change [] Addition
2.1 TITLE [] Change [] Addition
2.2 NAME [] Change [] Addition
2.3 STREET ADDRESS [] Change [] Addition
2.4 CITY-ST-ZIP [] Change [] Addition
3.1 TITLE [] Change [] Addition
3.2 NAME [] Change [] Addition
3.3 STREET ADDRESS [] Change [] Addition
3.4 CITY-ST-ZIP [] Change [] Addition
4.1 TITLE [] Change [] Addition
4.2 NAME [] Change [] Addition
4.3 STREET ADDRESS [] Change [] Addition
4.4 CITY-ST-ZIP [] Change [] Addition
5.1 TITLE [] Change [] Addition
5.2 NAME [] Change [] Addition
5.3 STREET ADDRESS [] Change [] Addition
5.4 CITY-ST-ZIP [] Change [] Addition
6.1 TITLE [] Change [] Addition
6.2 NAME [] Change [] Addition
6.3 STREET ADDRESS [] Change [] Addition
6.4 CITY-ST-ZIP [] Change [] Addition

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: *[Signature]*

3-23-98

CR2E034 (10/97)