2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

JMENT # P	98000028413				
RANE SERVICE, INC.					
ace of Business	Mailing Address				
ine PKWY	PO BOX 158				
RS FL 33912	NAPLES FL 34106				

FILED Jan 21, 2003 8:00 am Secretary of State

PRIOR MATERS PLASTED 7. Name and Address of Survey 8. Name and Address of Current Registered Agent 5. Name and Address of Current Registered Agent 7. Name and Address of Name Registered Agent 8. Name and Address of Current Registered Agent 7. Name and Address of Name Registered Agent 8. Name and Address of Current Registered Agent 7. Name and Address of Name Registered Agent 8. Name and Address of Name Registered Agent 9. Country 1. Co	DOCUMENT# P98000028413 1. Entity Name MAK CRANE SERVICE, INC.							01-21-2003 90195 028 ***150.00					
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Zip Country Zip Country S. Certificate Status Desired \$8.75 Additional Present Agent \$8.000 \$8.0	Suite, Apt	. #, etc.		Suit	e, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
Country Coun	City & Sta	te	14	City	& State	····	4.			El Number 59-35062 ()9	<u> </u>	
Name and Address of Current Registered Agent Name Na	Zip		Country	Zip	· · · · · · · · · · · · · · · · · · ·	Coun	itry		5. C	ertificate of Status Desired	. _	\$8.75 A	dditional
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Ref PERIMETER PARK BLV STE 13 JACKSON/LLE FL 32216					•		Name					- Agom	
STE 103 JACKSONVILLE FL 32216 City FL Zip Code 6. 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 SIGNATURE SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Cheek Payable to Findad Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE WATERS, JOSEPH A STREET ADDRESS OTY-ST-2P NAPLES FL 33942 TITLE DVP SIRET ADDRESS OTY-ST-2P SIRET ADDRESS OTY-ST-2P TITLE MAKE SIRET ADDRESS SIRET ADDRESS OTY-ST-2P TITLE MAKE SIRET ADDRESS SIRET ADDRESS SIRET ADDRESS SIRET ADDRESS OTY-ST-2P TOTY-ST-2P	GLACIER	&-GLACIEF	I PA				Stroot A	ddraga (E	O Bo	y Number is Not Assessed	hlo)		
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8. The above named entity submits this statement for the purpose of changing its registered algent, or both, in the State of Florida. It an itamiliar with, and accept the obligations of registered algent. SIGNATURE Signature May 1, 2003 Fee will be \$550.00 After May 1, 2003 Fee will be \$550.00 Change Addition Title			2010										
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After May 1, 2003 Fee will be \$550.00 May Be hadded reverse have be to Florida Department of State 10.	SIGNATURE	Signature, typed	or printed name of registered age	ent and title if app	licable. (NOT	E: Registered	d Agent signatu	ure required v	when rain	estating)	DATE	•	
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	12. I hereby o	ertify that the	information supplied wi	th this filing	does not qualify for			ed in Sec	tion 11	9.07(3)(i), Florida Statutes	s. I further c	ertify that the	information

of the corporation or the receive for 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 attachmen with an acceptance with all other like empowered.

SIGNATURE: