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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P98000103035

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90033 002 ***150.00

CRANE WELD, INC. Principal Place of Business Mailing Address		
Principal Place of Business Mailing Address		
	HI 1910 I HILD) BUH H	
PO BOX 590914 PO BOX 590914 FORT LAUDERDALE FL 33359-0914 FORT LAUDERDALE FL 33359-0914		
DO NOT WRITE IN THIS SPA	CE	
3. Date Incorporated or Qualifed		
12/02/1998	 	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied Fo	
26 65-0886923	Not Applica	
E Codificate of Status Decired	8.75 Additiona	al
22 27 27 27 27 27 27 27 27 27 27 27 27 2	Fee Required	
	5.00 May Be	
25	Added to Fees	
Zip Country Zip Country 8. This corporation owes the current year Intangib		
24 25 29 30 Personal Property Tax.		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agen 81 Name	н	
POWELL, MICHAEL L		
6823 BROADMOOR 82 Street Address (P.O. Box Number is Not Acceptable)		
()		
FORT LAUDERDALE FL 33068		
84 City 85	5 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 chanoffice 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 of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors.	1	 -
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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, or on a strachment with an address, with all other like empowered.

SIGNATURE:

4-26-99

954/973-9820