2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

FILED
Jun 01, 2004 08:00 AM
Secretary of State

DOCUMENT # A10272

1. Entity Name

BROKS CENTER, LIMITED

Principal Place of Business	Mailing Address
48 E. FLAGLER STREET, PH-105 MIAMI FL 33131	48 E. FLAGLER STREET, PH-105 MIAMI FL 33131

MOORE CR2E003 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2092899 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MARBIN, EVAN R
48 E. FLAGLER SR., PH 104
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE. SEE REVERSE SIDE FOR FEE INFORMATION.
$150,000.00		

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	G93288900003	STREET ADDRESS	
NAME	DOWNTOWN REALTY INVEST.	CITY-ST-ZIP	
STREET ADDRESS	48 E. FLAGLER ST., PH-105		
CITY-ST-ZIP	MIAMI FL 33131		
DOCUMENT #		STREET ADDRESS	U00000162048
NAME	EGOZI, LUIS	CITY-ST-ZIP	06/03/04-80006-010 526.25
STREET ADDRESS	217 E. RIVO ALTO DRIVE		
CITY-ST-ZIP	MIAMI BEACH FL 33139		
DOCUMENT #	A95000000853	STREET ADDRESS	
NAME	EGOZI FAMILY PARNTERSHIP	CITY-ST-ZIP	
STREET ADDRESS	4575 SABAL PALM ROAD		
CITY-ST-ZIP	MIAMI FL 33137		
DOCUMENT #		STREET ADDRESS	
NAME	GINZBURG, SAUL	CITY-ST-ZIP	
STREET ADDRESS	7901 BISCAYNE POINT CIR.		
CITY-ST-ZIP	MIAMI BEACH FL 33141		
DOCUMENT #		STREET ADDRESS	
NAME	GINZBURG, MARIO	CITY-ST-ZIP	
STREET ADDRESS	20605 N.E. 22ND PLACE		
CITY-ST-ZIP	N. MIAMI BEACH FL 33180		
DOCUMENT #		STREET ADDRESS	
NAME	GARAZI, ISSAC	CITY-ST-ZIP	
STREET ADDRESS	2025 N.E. 197TH STREET		
CITY-ST-ZIP	N. MIAMI BEACH FL 33179		

STAPLE CHECK HERE

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: _____ 6/1/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #