


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

16/3

DOCUMENT # P01000010256		
1. Entity Name BROOKS & COMPANY REAL ESTATE, INC.		

FILED

05 NOV 10 PM 4:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



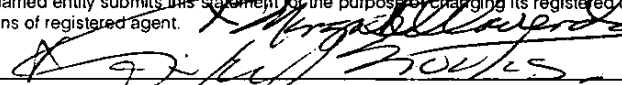
Principal Place of Business C/O MARRY G SOTO CPA-PA 8360 W FLAGLER ST STE 2067 MIAMI FL 33144	Mailing Address C/O SOTO & GONZALEZ CPAS 8360 WEST FLAGLER STREET #206 MIAMI FL 33144
--	--

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

1st MOORE- 4th FEI Number 65-1072382	CR2E0342(10/04) Applied For - Not Applicable
--	--

6. Name and Address of Current Registered Agent BROOKS, GASPAR C/O MARRY G SOTO CPA-PA 8360 W FLAGLER ST STE 2067 MIAMI FL 33144	
--	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	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 11/06/05 9/9/05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
---	--------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS VILLVERDE, MARGO R 9280 FONTAINBLEAU BLVD., APT. 301 MIAMI FL 33172 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: 	DATE: 9/9/05	Daytime Phone #
--	--------------	-----------------

MANNY G. SOTO, C.P.A., P.A.

CERTIFIED PUBLIC ACCOUNTANT
FORMER IRS AGENT

MEMBER, AMERICAN INSTITUTE CPA's, CACPA's, NSA

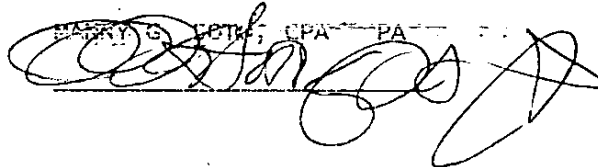
8360 W. Flagler Street., Suite 206
Miami, FL 33144
Ph: 305-225-1592
Ph: 305-225-1492
Fax: 305-225-8502

2003
CPA

@ SEPTEMBER 9/2005

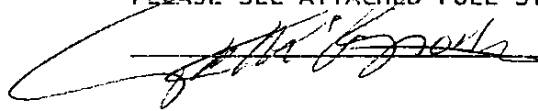
RE ANNUAL REPORT 2005 HEREBY FILED LATE
PLEASE ABATE/WAIVE ALL PENALTIES, TAXPAYER
SUFFERED EMOTIONAL/ FINANCIAL/ HEALTH
HARDSHIP AS WELL AS PROBLEMS, PLEASE SEE
THE TAXPAYER'S FULL EXPLANATION, PLEASE
WAIVE THE PENALTY .

RESPECTFULLY AND GRATEFULLY SUBMITTED


MANNY G. SOTO, CPA, PA

GASPAR BROOKS, TAXPAYER, PRESIDENT OF
BROOKS & COMPANY REAL ESTATE INC.

PLEASE SEE ATTACHED FULL STATEMENT



3023

To whom it may concern:

I started experiencing mild depressive episodes in the early 90's. My primary physician, Valerio Toyos, would prescribe anti depressants during these occurrences. In the late 90's these episodes became more frequent and more severe and started interfering with my work performance and my ability to generate income. Being a Real Estate Broker, a field that primarily requires sales, my abilities were greatly diminished during these episodes.

My reduced income created problems in my personal life. My illness was not accepted as such, by my spouse, who felt I was no longer the person she married. In early 2001, I was diagnosed as severely clinically depressed by a psychiatrist to whom my primary physician had referred me to. I started on therapy and continued the antidepressants, but this diagnosis led to my divorce effective in 2002.

I am still under treatment for depression and take anti depressants. What small income I have been able to generate has been mainly through the help of friends in the industry and clients that had known me well from before.

I have been able to subsist through the help of my mother, who has provided me with support since 2001. I am actively working on my recovery and with God's help should be functional at some point in the near future.

I am making a concerted effort to straighten out all of the negative issues in my life. I often feel that only someone that has experienced a deep depression can realize the effort it takes to try to overcome all adverse situations and get back on a positive constructive track.

Thank you in advance, for any help that you can give me towards the resolution of all the financial problems I am currently experiencing.