

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

02-25-2002 90067 027 \*\*\*158.75

0012657 AV

**DOCUMENT # 307721**

1. Entity Name

**BROOKE CUSTOM CLEANERS INC**

Principal Place of Business

**133 MAIN STREET  
 DAYTONA BEACH FL 32118  
 US**

Mailing Address

**133 MAIN STREET  
 DAYTONA BEACH FL 32118  
 US**

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 **59-1144987**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
 Fee Required **enclosed**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**BAKER, STEVEN G  
 133 MAIN ST  
 DAYTONA BEACH FL 32118**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	BAKER, JOHN H.	
STREET ADDRESS	2056 S. HALIFAX	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BAKER, GEORGE H.	
STREET ADDRESS	2056 S. HALIFAX	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	BAKER, STEVEN G.	
STREET ADDRESS	2056 S. HALIFAX	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BAKER, VIRGINIA S.	
STREET ADDRESS	2056 S. HALIFAX	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	BAKER, MAREA S.	
STREET ADDRESS	2056 S. HALIFAX	
CITY-ST-ZIP	DAYTONA Bch. FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP, S, T	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Baker, marea S.	
STREET ADDRESS	2056 S. Halifax	
CITY-ST-ZIP	Daytona Bch, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP, S, T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Baker, marea S.	
STREET ADDRESS	2056 S. Halifax	
CITY-ST-ZIP	Daytona Bch, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED** / President 2-12-02 (386)-253-4583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN G. Baker / President

Date

Daytime Phone #

CR2E034 (9/01)