

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 26, 2005 8:00 am
Secretary of State

07-26-2005 90026 031 ***158.75

DOCUMENT # F03000005521

1. Entity Name
BROOKS USA, INC.



Principal Place of Business
747 SE Country Club Rd
Lake City FL 32025-3302

Mailing Address
747 SE Country Club Rd
Lake City FL 32025-3302

DO NOT WRITE IN THIS SPACE



07142005 No Chg-P CR2E034 (10/03)

4. FEI Number
04-3700548

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PATEL, ARPIT P
3764 N.W. HUNTSBORO STREET, APT. 101
LAKE CITY, FL 32055

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
Arpit P Patel
747 SE Country Club Rd 101
Lake City FL 32025-3302

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
Arpit P Patel
747 SE Country Club Rd 101
Lake City FL 32025-3302

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

Arpit Patel
ARPIT P. PATEL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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