

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92000000300 (5)

1. Corporation Name

BROOKS PRODUCTS, INC.

Principal Place of Business

1172-B NICOLE COURT
GLENDDORA CA 91740

Mailing Address

1172-B NICOLE COURT
GLENDDORA CA 91740

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -9 PM 12:09

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/18/1992	3a. Date of Last Report 06/27/1994
4. FEI Number 95-4266378	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. This Corporation has liability for intangible tax under s. 190.099, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

B1 Name	B5 Zip Code
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	FL

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 changing its registered office 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 as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	MARGE, GUY E.
STREET ADDRESS	1172-B NICOLE COURT
CITY - ST - ZIP	GLENDDORA CA
TITLE	DC
NAME	MILHOUS, ROBERT E
STREET ADDRESS	1172-B NICOLE COURT
CITY - ST - ZIP	GLENDDORA CA
TITLE	VD
NAME	MILHOUS, PAUL B
STREET ADDRESS	1172-B NICOLE COURT
CITY - ST - ZIP	GLENDDORA CA
TITLE	ST
NAME	BRESSAN, THOMAS V
STREET ADDRESS	1172-B NICOLE COURT
CITY - ST - ZIP	GLENDDORA CA 91740
TITLE	ST
NAME	DORFF, KENNETH R.
STREET ADDRESS	1172-B NICOLE CT.
CITY - ST - ZIP	GLENDDORA CA
TITLE	P
NAME	BODHAINE, LARRY
STREET ADDRESS	1172-B NICOLE COURT
CITY - ST - ZIP	GLENDDORA CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Kenneth R. Dorff KENNETH R. DORFF 8/3/95

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Daytime (Area #)

CR2E034 (3/95)