

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H38788

FILED
Jan 12, 2002 8:00 AM
Secretary of State

Entity Name: BROOKS INDUSTRIES, INC.

Current Principal Place of Business:

671 NE 195 ST.
#410
MIAMI, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2487
HALLANDALE B, FL 33008 US

New Mailing Address:

FEI Number: 59-2496316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, ROBERT
671 NE 195 ST.
#410
N. MIAMI BCH., FL 33179 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SVT () Delete
Name: BROOKS, ROBERT,
Address: 671 NE 195 ST, #410
City-St-Zip: MIAMI, FL 33179 US

Title: PD () Delete
Name: BROOKS, ROBERT,
Address: 671 NE 195 ST., #410
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BROOKS

PRES

01/12/2002

Electronic Signature of Signing Officer or Director

Date