## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

**DOCUMENT #** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

L61130

(5)

2a. Mailing Address

R. BROOKS ELECTRIC, IN	IC.
Principal Place of Business	Mæling Address
7058 PLUMWOOD CT ORLANDO FL 32818	7058 PLUMWOOD CT ORLANDO FL 32818



3a. Date of Last Report 06/07/1995

Applied Far

3. Date Incorporated or Qualified

03/29/1990

4. FEI Number

2. Principal Plac	Principal Place of Business 2a. Making Address				4. FEI Number	Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc		26			59-2996827	Not Applicabie	
				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
27					6. Election Campaign Financing	\$5.00 May Be	
City & State City & State 28					Trust Fund Contribution	Added to Fees	
Zip	Country 25	<b>├</b> ──¬			8. This corporation has liability for intangible tax under s 199 032, Floriou Statutes   X Yes   No  No		
25 29 30 30 30 30 30 30 30 30 30 30 30 30 30					10. Name and Address of New Registe	ered Agent	
			81	Name	***************************************		
BROOKS, RONALD L.				82 Street Address (P.O. Box Number is Not Acceptable)			
7058 PLUMWOOD CT			83	83			
ORLANI	ORLANDO FL 32818			<u> </u>			
			84	City		FL 85 Zip Gode	
familiar with SIGNATURE	n, and accept the obligations of, Sa Signature typed or printed native of registered as	schon 607.0505, Fiorida Statute	es Note: Buy vered Ag		rd of directors. I hereby accept the appointme		
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
ITLE	PD	☐ DELETE	1 1 TeTLE			Change Addition	
vAME	BROOKS, RONALD L.		1.2 NAME				
TREET ADDRESS	7058 PLUMWOOD CT		13 STREE	T ADDRESS			
DITY-ST-ZIP	ORLANDO FL		1.4 CHY-	Si-ZiP			
TITLE	SD	DELETE	2 1 BTu6			Change Addition	
NAME	Brooks, Paula		2.2 NAME				
STREET ADDRESS	7058 PLUMWOOD CT		2 3 STREE	LADORESS			
CITY - ST - ZIP	ORLANDO FL		2 4 Cily -				
ITL€		☐ DELETE	3 1 1111 6			. Change DAddition	
IAME			3.2 NAME				
STREET ADDRESS			3.3 STHE	ET ADURESS			
CITY-ST-ZIP			3.4 CiTr -			Down Distance	
TITLE		☐ DELETE	. 4 t TITLE			Change Addition	
NAME			4.2 NAME				
STREET ADDRESS			1	I ADDRESS			
CITY ST ZIP		☐ DELETE	4.4 CITY 5.1 THILE			Change Addition	
TITLE				1			
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CITY - ST - ZIF TITLE		DELETE	5.4 CITY 6.1 TITLE			Change Addition	
		[ Steel	62 NAME				
NAME exorer apposes				FI ADDRESS			
STREET ADDRESS			64 CITY				
CITY -ST - ZIP	L and first the information over the	S w.B. thus files us valuet with fo			for the exemption stated in Section 119 07/3/	k) Florida Statutes   further	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if that 3pd, or on an academic with an address

SIGNATURE: