

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000043619

Entity Name: BROOKNAM CORP.

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2054 SW PROVIDENCE PLACE  
PORT SAINT LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

2054 SW PROVIDENCE PLACE  
PORT SAINT LUCIE, FL 34953

**New Mailing Address:**

2054 SW PROVIDENCE PLACE  
PORT SAINT LUCIE, FL 34953 US

FEI Number: 27-0725514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORRES, WILLIAM  
2054 SW PROVIDENCE PLACE  
PORT SAINT LUCIE, FL 34953 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TORRES, WILLIAM  
Address: 2054 SW PROVIDENCE PLACE  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VP  
Name: TORRES, VIANCA  
Address: 2054 SW PROVIDENCE PLACE  
City-St-Zip: PORT ST LUCIE, FL 34953

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM TORRES

P

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date