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FILED

Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P33294

(0)

1. Corporation Name

BROOKE GROUP LTD. INC.



Principal Place of Business

100 SE SECOND ST - 32ND FL
MIAMI FL 33131
US

Mailing Address

100 SE SECOND ST - 32ND FL
MIAMI FL 33131-2100
US

3. Date Incorporated or Qualified

03/21/1991

3a. Date of Last Report

02/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

51-0255124

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

8. This corporation has liability for intangible tax under
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 of the corporation, its authorized registered agent, and the incorporator

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CPD	<input type="checkbox"/> DELETE
NAME	LEBOW, BENNETT S	
STREET ADDRESS	100 SE SECOND ST - 32ND FL	
CITY - ST - ZIP	MIAMI FL	
TITLE	VT	<input checked="" type="checkbox"/> DELETE
NAME	SAUTER, GERALD E	
STREET ADDRESS	100 SE SECOND ST - 32ND FL	
CITY - ST - ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BELL, MARC N	
STREET ADDRESS	100 SE SECOND ST., 32ND FLOOR	
CITY - ST - ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PODELL, JEFFREY S.	
STREET ADDRESS	70 E SUNRISE HWY	
CITY - ST - ZIP	VALLEY STREAM NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Eide, Robert J.	
1.3 STREET ADDRESS	70 East Sunrise Highway	
1.4 CITY - ST - ZIP	Valley Stream, NY 11581	
2.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Van Sicken, Joselynn D.	
2.3 STREET ADDRESS	100 SE Second St - 32nd FL	
2.4 CITY - ST - ZIP	Miami, FL 33131	
3.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Kampen, Richard J.	
3.3 STREET ADDRESS	100 SE Second St - 32nd FL	
3.4 CITY - ST - ZIP	Miami, FL 33131	
4.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Balog, Andrew E.	
4.3 STREET ADDRESS	100 SE Second St - 32nd Floor	
4.4 CITY - ST - ZIP	Miami, FL 33131	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed, or as an attachment with an address.

SIGNATURE:

Marc N. Bell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marc N. Bell, Secretary

01-03-97

Date

305-579-8000

Daytime Phone #

CR2E034 (9/96)