

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90196 002 ***150.00

DOCUMENT # P99000070961

1. Entity Name
FALLBROOK CAPITAL CORPORATION



Principal Place of Business
**2716 NE 34TH STREET
FORT LAUDERDALE, FL 33306**

Mailing Address
**2716 NE 34TH STREET
FORT LAUDERDALE, FL 33306**

14006799

2. Principal Place of Business
2509 NE 35th Drive
Suite, Apt. #, etc.

3. Mailing Address
2509 NE 35th Drive
Suite, Apt. #, etc.



04212004 Chg-P CR2E034 (10/03)

City & State
Fort Lauderdale, FL
Zip
33308 Country
USA

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Fort Lauderdale, FL
Zip
33308 Country
USA

4. FEI Number
65-0941869 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BLANKEN, BRANDT
2716 NE 34TH STREET
FORT LAUDERDALE, FL 33306**

7. Name and Address of New Registered Agent

Name
Blanken, Brandt
Street Address (P.O. Box Number is Not Acceptable)
2509 NE 35th Drive
City
Fort Lauderdale FL Zip Code
33308

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Bradt Blanken** DATE **4-21-04**
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLANKEN, BRANDT 2716 NE 34TH ST. FORT LAUDERDALE, FL 33306	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Blanken, Brandt 2509 NE 35th Drive Fort Lauderdale, FL 33308	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Bradt Blanken** DATE **4-21-04** DAYTIME PHONE # **954-564-6722**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR