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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F92000000892 (1)

1. Corporation Name

BRENT AMERICA, INC.

Principal Place of Business

16961 KNOTT AVENUE
LA MIRADA CA 90638

Mailing Address

16961 KNOTT AVENUE
LA MIRADA CA 90638

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.02(2) and 607.11(2)(c), 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, Sections 607.02(2) and 607.11(2)(c), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
P	ALEXANDER, DOBBIE	16961 KNOTT AVENUE LA MIRADA CA	
V	MILLARD, N.R.	16961 KNOTT AVENUE LA MIRADA CA	
ST	CROWE, DAVID H	16961 KNOTT AVENUE LA MIRADA CA 90638	
D	SAVINELLI, E.A.	16961 KNOTT AVENUE LA MIRADA CA 90638	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	Change	Addition
President	Malcolm S. Stopps	921 Sherwood Dr. Lake Bluff, IL 60044		☐	☒
Vice President	James S. Lewis	921 Sherwood Dr. Lake Bluff, IL 60044		☐	☒
Chairman	Alexander Dobbie	16961 Knott Ave. La Mirada, CA 90638		☒	☐

14. I do hereby certify that the information supplied with this filing is a true and correct statement of the facts and circumstances for the exemption stated in Section 119.01(1)(a), Florida Statutes. I further certify that the information indicated on this form is true and correct 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 and that I am authorized 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 on any attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D. H. Crowe

SECRETARY/TREASURER

I-26-96

714/739-2821

CR2E034 (12/95)