## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000017104

Entity Name: ADAR ASSOCIATES, LLC

**FILED** Mar 06, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3800 N. 39TH AVENUE 6865 N LINCOLN AVE HOLLYWOOD, FL 33021 LINCOLNWOOD,, IL 60712

**Current Mailing Address: New Mailing Address:** 

C/O GINSPARG 3389 SHERIDAN, #195 HOLLYWOOD, FL 33021

FEI Number: 20-0822965 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GINSPARG, NORMAN J 12221 WEST DIXIE HIGHWAY NORTH MIAMI, FL 33161

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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change ( ) Addition

ESFORMES, PHILIP ESFORMES, PHILIP Name: Name: Address: 6865 N. LINCOLN AVE Address: 6865 N. LINCOLN AVE City-St-Zip: LINCOLNWOOD, IL 60712 City-St-Zip: LINCOLNWOOD, IL 60712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PHILIP ESFORMES 03/06/2007