2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

FILED DOCUMENT # \$71956 Apr 25, 2000 8:00 am Secretary of State 1. Entity Name ADLER MANAGEMENT SERVICES, INC. 04-25-2000 90015 026 ***150.00 Mailing Address Principal Place of Business 1400 NW 107 AVE. 1400 NW 107 AVE. 5TH FLOOR 5TH FLOOR MIAMI FL 33172-2746 MIAMI FL 33172 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4, FEI Number Applied For City & State 65-0286530 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEVY, JOEL Street Address (P.O. Box Number is Not Acceptable) 1400 NW 107 AVE. 5TH FLOOR **MIAMI FL 33172** Zip Code City 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DICEUJEV D7 Change ☐ Addition DPCE Delete TITLE ADLER, MICHAEL M. NAME NAME STREET ADDRESS STREET ADDRESS 1400 NW 107 AVE. CITY-ST-ZIP CITY-ST-7IP MIAMI FL ☐ Change ☐ Addition DST ☐ Delete TITLE TITLE ARRIZURIETA, LUIS NAME NAME STREET ADDRESS STREET ADDRESS 1400 N W 107TH AVENUE CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33172** ☐ Change ☐ Addition TITLE DEVA ☐ Delete TITLE LEVY, JOEL NAME NAME STREET ADDRESS STREET ADDRESS 1400 NW 107 AVE. CITY-ST-7IP CITY-ST-ZIF MIAMI FL ☐ Change ■ Addition ☐ Delete TITLE TITLE ADLER, LINDA NAME NAME STREET ADDRESS STREET ADDRESS 1400 NW 107 AVE CITY-ST-ZIP CITY-ST-ZIP MIAM! FL ☐ Change Addition A **⊠** Delete TITLE TITLE HARRIS, BRETT W. PAGET, JACK NAME NAME 1400 N.W. 107 AVE. STREET ADDRESS STREET ADDRESS 1400 NW 107TH AVENUE MIAMI, FL 33172 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (9/99