2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000000118

1. Entity Name
BERT ADLER CO, INC.

Principal Place of Business	Mailing Address
2143 NW 60TH CIR BOCA RATON, FL 33496-2652	2143 NW 60TH CIR BOCA RATON, FL 33496-2652

DO NOT WRITE IN THIS SPACE

02262008   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
13-1542985		Not Applicable

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

6. Name and Address of Current Registered Agent

GOODMAN, DAN
2143 NW 60TH CIR
BOCA RATON, FL 33496

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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 _Carol Goodman_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

DATE 3-18-08

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

U000000865688
04/07/08-80038-020 150.00

10.	OFFICERS AND DIRECTORS
TITLE	PCTD
NAME	GOODMAN, DAN
STREET ADDRESS	2143 NW 60TH CIR
CITY-ST-ZIP	BOCA RATON, FL
TITLE	VSD
NAME	GOODMAN, CAROL
STREET ADDRESS	2143 NW 60TH CIR
CITY-ST-ZIP	BOCA RATON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _Bert Adler / Carol Goodman_   3-18-08

3-13-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #