

FILED
Feb 28, 2006 8:00 am
Secretary of State

DOCUMENT # F05000004452			
1. Entity Name ALM BROKERAGE, INC.			
Principal Place of Business 9145 JASMINE WAY FOX RIVER GROVE, IL 60021		Mailing Address 20856 N RAND RD BARRINGTON, IL 60010	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent			
BLOOM, DAVE 1300 NW 26TH LN DEL RAY BEACH, FL 33445			Name
			Street Address
			City
8. The above named entity submits this statement for the purpose of changing its registered office or registering the obligations of registered agent.			
SIGNATURE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5 Ad	
10. OFFICERS AND DIRECTORS			
TITLE	CP	<input type="checkbox"/> Delete	
NAME	MARSELLA, SHERYL		
STREET ADDRESS	9145 JASMINE WAY		
CITY- ST- ZIP	FOX RIVER GROVE, IL 60021		
TITLE	DST	<input type="checkbox"/> Delete	
NAME	MARSELLA, DANIEL		
STREET ADDRESS	9145 JASMINE WAY		
CITY- ST- ZIP	FOX RIVER GROVE, IL 60021		
TITLE		<input type="checkbox"/> Delete	
NAME			
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CITY- ST- ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained indicated on this report or supplemental report is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			



ATTACHMENT

66003073

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 10, 2006

ALM BROKERAGE, INC.
20856 N RAND RD
BARRINGTON, IL 60010

Subject: ALM BROKERAGE, INC.

Reference Number: E05000004452

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH
ANNUAL REPORTS SECTION