2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F62864

Entity Name: THE ADLER NETWORK, INC.

FILED Jan 15, 2008 Secretary of State

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

6365 NW 6TH WAY 947 CLINT MOORE ROAD SUITE 170 BOCA RATON, FL 33487

FT.LAUDERDALE, FL 333096161

Current Mailing Address: New Mailing Address:

6365 NW 6TH WAY 947 CLINT MOORE ROAD SUITE 170 BOCA RATON, FL 33487

FT.LAUDERDALE, FL 333096161

FEI Number: 59-2162794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ADLER, MAXINE
6365 NW 6TH WAY SUITE 170
FORT LAUDERDALE,, FL 33309
US

ADLER, MAXINE
947 CLINT MOORE ROAD
BOCA RATON, FL 33487
US

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: 01/15/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ADLER, MAXINE,
 Name:
 ADLER, MAXINE,

 Address:
 6365 N.W. 6TH WAY STE 170
 Address:
 947 CLINT MOORE ROAD

City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: BOCA RATON, FL 33487

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

Name: ADLER, OWEN Name: ADLER, OWEN

 Address:
 6365 N.W. 6TH WAY , STE.170
 Address:
 947 CLINT MOORE ROAD

 City-St-Zip:
 FT. LAUDERDALE, FL
 City-St-Zip:
 BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OWEN ADLER VPTD 01/15/2008