### 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000003118

Entity Name
 ADLER DIXIE LLC

Principal Place of Business

1400 NORTHWEST 107TH AVE. MIAMI, FL 33172-2704

Mailing Address

1400 NORTHWEST 107TH AVE. MIAMI, FL 33172-2704

### FILED Apr 29, 2004 08:00 AM Secretary of State



03292004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1000295

Not Applicable

Applied For

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVY, JOEL 1400 NORTHWEST 107TH AVE. MIAMI, FL 33172-2704

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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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstaling)

DATE

#### Filing Fee is \$50.00 Due by May 1, 2004

SIGNATURE: 🗹

9.	MANAGING MEMBERS/MANAGERS
TITLE	PCEO
NAME	ADLER, MICHAEL M
STREET ADDRESS	1400 NORTHWEST 107TH AVE.
CHIV-ST ZIP	MIAMI. FL 331722704
TITLE	EVAS
NAME	LEVY, JOEL
STREET ADDRESS	1400 NORTHWEST 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 331722704
TITLE	V
NAME	MARTINEZ, JOSE
STREET ADDRESS	1400 NORTHWEST 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 331722704
TITLE	ST
NAME	ARRIZURIETA, LUIS
STREET ADDRESS	1400 NORTHWEST 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 331722704
TITLE	AS
NAME	ADLER, LINDA K
STREET ADDRESS	1400 NORTHWEST 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 331722704
TITLE	MGRM
NAME	ADLER, MICHAEL M
STREET ADDRESS	1400 NW 107 AVE
CITY-ST-ZIP	MIAMI, FL 33172

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11. Thereby 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 is true and appurate and that my signature shall have the same legal effect as if made under eath, that I am a managing member or manager of the limited habitity company or the receipter or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Linda K. Adler

Asst. Secy.

4/27/04

305-392-4051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone