2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000003759"

1. Entity Name

ADLER FAMILY INVESTMENTS, LLC



Principal Place of Business Ma

C/O 1700 NORTHEAST 26TH STREET #4 FORT LAUDERDALE, FL 33305-1413 Mailing Address

C/O 1700 NORTHEAST 26TH STREET #4 FORT LAUDERDALE, FL 33305-1413

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



04262004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1015078 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ADLER, KARL W 1700 NORTHEAST 26TH STREET #4 FORT LAUDERDALE, FL 33305

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| The above named entity submits this statement for the purpose of changi the obligations of registered agent. | ing its registered office or registered agent, or both, | in the State of Florida. I am familiar with, and accept |
|--|--|---|
| SIGNATURE | (NOTE. Registered Agent signature required when reinstating) | DATE |

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

| 9. | MANAGING MEMBERS/MANAGERS |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR ADLER, KARL W 1700 NORTHEAST 26TH STREET 4 FORT LAUDERDALE, FL 33305 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-SY-ZIP | |

U00000140428 04/29/04-80159-016 50.00

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

SIGNATURE: * / LU CIACLA, MGR
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OF ANTHORIZED REPRESENTATIVE

4-26-04

Date

Daytime Phone #