## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000000111

1. Entity Name ADG GROUP, LLC

FILED
Mar 17, 2004 08:00 AM
Secretary of State

Principal Place of Business

825 PARKWAY STREET, SUITE #4 JUPITER, FL 33477 Mailing Address

825 PARKWAY STREET, SUITE #4 JUPITER, FL 33477



DO NOT WRITE IN THIS SPACE

01082004No Chg-LLC

CR2E083 (10/03)

	_		
4. FEI Number			Applied For
03-0398753		. [	Not Applicat
5. Certificate of Status Desired		\$5.00 Fee Red	Additional puired

6. Name and Address of Current Registered Agent

LUBECK, JOSEPH G 825 PARKWAY STREET, SUITE #4 JUPITER, FL 33477

CRY-ST-23P

SIGNATURE:

SIGNATURE A

## DO NOT WRITE IN THIS SPACE

JUPRER, FL 33477			IN THIS SPACE		
	named entity submits this statement for the purpose of chartions of registered agent.	ging its registered office or registered a	agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when	an reinstailing) DATE		
F	iling Fee is \$50.00 ue by May 1, 2004		U00000091216 03/17/04-80049-023 50.00		
9.  TOTAL  NAME  STREET ADDRESS  CITY-SI- 3P  TOTAL  NAME  STREET ADDRESS	MANAGING MEMBERS/MANAGERS MGR LUBECK, JOSEPH G 825 PARKWAY STREET, SUITE #4 JUPITER, FL 33477	- · · · - · · · · · · · · · · · · · · ·			
CITY-ST-ZIP  III LE  NAME  STREET ADDRESS  CITY-ST-ZIP			DO NOT WRITE		
THEE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY ST-ZIP					
TITLE NAME STREET ADDRESS					

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Soction 119.07(3)(i). Forida 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 receives or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

ID TYPED OR PRINTED NAME OF SIGNING MANAGING MERIBER, OR AUTHORIZED REPRESENTATIVE