2006 LIMITED LIAL LITY COMPANY ANNUAL REPORT

ANNUAL REPORT				FILED	
DOCUMENT # L04000063247 1. Entity Name ADLER FINANCIAL GROUP, LLC				Apr 27, 2006 08:00 A Secretary of State	
6711 NORTH	e of Business H OCEAN RIDGE BOULEVARD, #35 E, FL 33435	Mailing Address 6711 NORTH OCEAN RIDGE BO OCEAN RIDGE, FL 33435	DULEVARD, #35	578 87 \$1 \$2 7 \$1 7 \$2 7	
74	OO NOT WRITE	IN THIS SPA	ĈE	02242006 No Chg-LLC	CR2E083 (11/05)
				FEI Number 20-1665099 Certificate of Status Desired	Applied For Not Applicable South Not Applicable South Not Applicable South Not Applicable Not Applicable
OCEAN R	6. Name and Address of Current R AVID RTH OCEAN RIDGE BOULEVAR IDGE, FL 33435	tD, #35	ed office or register	DO NOT V IN THIS S ed agent, or both, in the State of	PACE
	tions of registered agent. Signature, typed or printed name of registered agent an		d Agent signature required		DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2006				
9.	MANAĞING MEMBER	S/MANAGERS	the second second	THE STATE OF THE S	
NAME STREET ADDRESS CRY-ST-ZIP	MGR ADLER, DAVID H 6711 N OCEAN BLVD, #35 OCEAN RIDGE, FL 33435				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Make we differ the	IIS/Us/	06-80067-018 150.00
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

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

| Date | Daytime Phone #