## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L05000067948

1. Entity Name

ADER PROPERTIES COMMERCIAL BLVD. #2, LLC



FILED Apr 23, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

100 S.E. 2ND STREET, STE. 3550 MIAMI, FL 33131

100 S.E. 2ND STREET, STE. 3550 MIAMI, FL 33131



01222007 No Chg-LLC

CR2E083 (11/05)

FEI Number
 20-3564901

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ADER, ROBERT 100 S.E. 2ND STREET, STE. 3550 MIAMI, FL 33131

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	named entity submits this statement for the purpose of charions of registered agent.	nging its registered office or registered agent, or both, in the S	tate 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 reinstating)	DATE
FI D	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		<del></del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ADER, ROBERT 100 SE 2ND ST #3550 MIAMI, FL 33131		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE
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TITLE NAME STREET ADDRESS CITY_ST_7IP			

11. I hereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is the 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 justice empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

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

4/18/07-3053516060