FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

M83968

(1)

ADLER FINANCIAL MANAGEMENT, INC.

Pi	Principal Place of Business Mailing Address						4 19010011 and solden state south beset fort distant did	
	6960 N.W. 3RD COURT CORAL SPRINGS FL 33071		8960 N.W. 3RD COURT CORAL SPRINGS FL 330)71			DO NOT WRITE IN THIS S	PACE
							3. Date Incorporated or Qualified 06/06/1988	
- i	Principal Place of Business	<u></u> ├──┐	. Mailing Address				4. FEI Number	Applied For
21		26					59-2901748	Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	City & State	28	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Zip Country 25	29	Zip	Coun	try		8. This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Intangible Yes No
	9. Name and Address of Curren	Regis	stered Agent				10. Name and Address of New Registered A	gent '
	COHN, L. JERRY				91	Name		
6800 W. COMMERCIAL BLVD. Suite 3				32	Street Address (P.O. Box Number is Not Acceptable)			
	FT. LAUDERDALE FL 33319			[1	33			
					34		FL	85 Zip Code
-14	Purguent to the provisions of Sections 607 0503	and 6	307 1609 Elorida Statutos	the sh	<u></u>	named corne		phonoina ita ragistarad

11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of corporation of the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the appointment as registered agent.

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent and title if applica	hle. (NOTE F	legistered Agent signature	re required when reinslating) DATE				
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	DP	DELETE	1.1 TITLE	Change Addition				
NAME	ADLER, JACKSON L.		1.2 NAME					
STREET ADDRESS	8960 N.W. 3RD COURT		1.3 STREET ADDRESS	;				
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY - ST - ZIP					
TITLE	DS	DELETE	2.1 TITLE	☐ Change ☐ Addition				
NAME	ADLER, LINDA H.		2.2 NAME					
STREET ADDRESS	8960 N.W. 3RD COURT		23 STREET ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS FL		2.4 CITY-ST-ZIP					
TITLE		DELETE	3.1 TITLE	Change Addition				
NAME			3.2 NAME					
STREET ADDRESS		i	3.3 STREET ADDRESS					
CITY - ST - ZIP			3.4. CITY-ST-ZIP					
TITLE		DELETE	4.1 TITLE	Change Addition				
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 City-St-ZiP					
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition				
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE	Change Addition				
NAME		į	6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE. Senda N. adler LINDA 4 ADLER 410-98 954-252-330

CR2E034 (10/97)

FILED

Apr 15 1998 8:00am

Secretary of State