


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P31652</b> 1. Entity Name KURT S. ADLER, INC.	
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Principal Place of Business 1107 BROADWAY NEW YORK, NY 10010	Mailing Address 1107 BROADWAY NEW YORK, NY 10010
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<b>DO NOT WRITE IN THIS SPACE</b>
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01202004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-5654539	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  ADLER, CLIFFORD MIAMI MERCHANDISE MART 777 NORTHWEST 72ND AVENUE, SUITE 1-AA 39 MIAMI, FL 33126
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000084132 02/23/04-80191-011 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ADLER, KURT S. 422 E 72ND STREET, #38C NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPM ADLER, HOWARD 60 PARK ROAD SCARSDALE, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSPF ADLER, CLIFF 15 BUTLER ROAD SCARSDALE, NY 10583
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ADLER, KAREN 500 E 85TH ST NEW YORK, NY 10028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE \_\_\_\_\_ 2/13/04 211-826-8843