

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000052790

1. Entity Name

ADLER COMMERCIAL REALTY, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90015 007 ***150.00

Principal Place of Business

1400 NW 107TH AVE.
5TH FLOOR
MIAMI FL 33172

Mailing Address

1400 NW 107TH AVE.
5TH FLOOR
MIAMI FL 33172-2746

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0760015

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEVY, JOEL
1400 NW 107TH AVE.
5TH FLOOR
MIAMI FL 33172

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	DP			
	ADLER, MICHAEL M	1400 NW 107TH AVE.	MIAMI FL	
	DVAS			
	LEVY, JOEL	1400 NW 107TH AVE.	MIAMI FL 33172	
	DST			
	ARRIZURIETA, LUIS	1400 NW 107TH AVE	MIAMI FL 33172	
	AS			
	ADLER, LINDA K	1400 N.W. 107 AVENUE	MIAMI FL 33172	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda K. Adler, Assistant Secretary

Date

Daytime Phone

3/26/00

(305) 392-4051

CR2E034 (9/99)