

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000084370 (2)

1. Corporation Name

ADLER NT, INC.



Principal Place of Business

8181 N.W. 14 STREET
MIAMI FL 33126

Mailing Address

8181 N.W. 14 STREET
MIAMI FL 33126

2. Principal Place of Business

2a. Mailing Address

21 1400 N.W. 107 Ave.

26 1400 N.W. 107 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 5th Floor

27 5th Floor

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip

Country

Zip

Country

24 33172

25

29 33172

30

9. Name and Address of Current Registered Agent

LEVY, JOEL
8181 N.W. 14 STREET
MIAMI FL 33126

3. Date Incorporated or Qualified

11/02/1995

3a. Date of Last Report

N/A

4. FEI Number

65-0620917

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

Same

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

1400 N.W. 107 Ave. 5th Floor

83

84 City

Miami

FL

85 Zip Code

33172

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent of the corporation.

Signature of the person who is the registered agent of the corporation.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D P

☐ Change

☒ Addition

1.2 NAME

MICHAEL M. ADLER

1.3 STREET ADDRESS

1400 NW 107th AVE.

1.4 CITY - ST - ZIP

MIAMI FL 33172

2.1 TITLE

D VP S

☐ Change

☒ Addition

2.2 NAME

JOEL LEVY

2.3 STREET ADDRESS

1400 NW 107th AVE.

2.4 CITY - ST - ZIP

MIAMI FL 33172

3.1 TITLE

D T

☐ Change

☒ Addition

3.2 NAME

HERBERT ADLER

3.3 STREET ADDRESS

1400 NW 107th AVE

3.4 CITY - ST - ZIP

MIAMI FL 33172

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

200001810502

-05/07/96--01021--046

***200.00

☐ Change

☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

(305) 392-4010

CR2E034 (12/95)