File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY SECRETARY OF STATE DIVISION OF CORPORATIONS Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAR 13 PM 12: 01 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L97000001143 1a. Principal Place of Business Address MATTEAU, L.L.C. 500 WOODWARD AVENUE, SUITE 2500 500 WOODWARD AVENUE, SUITE 2 DETROIT MI 48226 DETROIT MI 48226 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 2286 BRUNER LANG 10/14/1997 4. FEI Number FL Applied For 65-0807773 City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired 86.75 Additional Lee Required SAMÉ 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. MATTEMU DATE MARCH SIGNATURE 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR MATTEAU, ROGER 0305 RIVERSIDE DRIVE EAST WINDSOR, ONT. 2286 BRUNER LANG -FORT MYFRS, FURIOR MGR 8385 RIVERSIDE DRIVE EAST MATTEAU, IRENE WINDSOR, ONT., CANAD FORT MYORS, PRORIBA 400002459294--03/17/98--01043--003 ****188.75 ****188.75

11. Ido 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 is true 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

941-472-8888

SIGNATURE:

Mat

ROGER MATTERN

MARCH 9 (998