2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State DOCUMENT # L00000004067 03-27-2008 90084 044 ***138.75 1. Entity Name ALW, L.L.C. PAATLAAL Mailing Address Principal Place of Business 600 SAN MARCOS DR. 27145 SHERATON DR FT. LAUDERDALE, FL 33301 NOVI, MI 48377 01072008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-3530831 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHWW, INC. DO NOT WRITE 390 N. ORANGE AVE., SUITE 1500 ORLANDO, FL 32801 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGR TITLE NAME WISNE, ALAN L 600 SAN MARCOS DRIVE STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33301 MGR TITLE WISNE, KATHRYN L NAME STREET ADORESS 600 SAN MARCOS DRIVE CITY-ST-ZIP FT. LAUDERDALE, FL 33301 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes: I further certify that the information discourate and that may signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the biver or pustee impowered to execute this report as required by Chapter 608, Florida Statutes. indicated on this report is true an

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED

Mar 27, 2008 8:00 am