### 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

#### DOCUMENT # L05000108960

1. Entity Name 158 DUNDEE LLC



Principal Place of Business

31550 NORTHWESTERN HIGHWAY SUITE 200 FARMINGTON HILLS, MI 48334

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31550 NORTHWESTERN HIGHWAY SUITE 200

FARMINGTON HILLS, MI 48334

**FILED** Feb 18, 2008 08:00 AN Secretary of State



02062008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number	
	20-3789259	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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<ol><li>The above named entity submits this statement for the purpose of changing its registe the obligations of registered agent.</li></ol>	ered office or registered agent, or both, in the	e State of Florida. I am familiar with, and accep
SIGNATURE	ered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75		3 st

9. MANAGING MEMBERS/MANAGERS MGRM TITLE SHAPIRO, MICKEY NAME STREET ADDRESS 31550 NORTHWESTERN HWY., SUITE 200 CITY-ST-ZIP FARMINGTON HILLS, MI 48334 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-7iP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this 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.

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

2/4/08

248-538.4562

Daytime Phone #