2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 03, 2008 8:00 am Secretary of State **DOCUMENT # M07000004922** 01-23-2008 90023 012 ***138.75 GUNABAR, LLC Principal Place of Business Mailing Address 363 W. BIG BEAVER RD SUITE 200 363 W. BIG BEAVER RD SUITE 200 30000949 TROY, MI 48084 TROY, MI 48084 01052008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 20-3493071 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOTT, RYAN DO NOT WRITE 19839 N.W. 2ND AVE MIAMI GARDENS, FL 33169 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. FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM TITLE GUNABALAN, RAM MAME 363 W. BIG BEAVER RD SUITE 200 STREET ADDRESS TROY, MI 48084 CITY-ST-ZIP MGRM TITLE MOTT, RYAN NAME 19839 NW 2ND AVE. STREET ADORESS CITY-ST-ZIP MIAMI GARDENS, FL 33169 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP TITLE -IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP · ITTLE ---NAME STREET ADDRESS. CITY-ST-7P 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. 2-29-08 SIGNATURE:

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

FILED