

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000110017

**Entity Name:** MICHIGAN EB-5 REGIONAL CENTER, LLC

**Current Principal Place of Business:**

101 W BIG BEAVER, STE 1400  
TROY, MI 48084

**Current Mailing Address:**

101 W BIG BEAVER, STE 1400  
TROY, MI 48084 US

**FEI Number:** 82-4721728

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC.  
3030 N ROCKY POINT DR, STE 150A  
TAMPA, FL 33607 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR, AMBR  
Name FOSTER, AMY  
Address 1877 SHEPHERDS DRIVE  
City-State-Zip: TROY MI 48084

Title MGR  
Name ZHANG, QI  
Address 1877 SHEPHERDS DRIVE  
City-State-Zip: TROY MI 48084

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AMY FOSTER

**MS**

**03/12/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date