FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000005762 (6)

NEW M	IARRIOTT MI, INC.				
Principal Place	of Business	Mailing Address		T HORITAGO INTO HOUSE SOUR ABOUT DESTEN ENTRE ENTRE OF	irif dərər Shili şodrik blirid ifibi (80)
10400 FERNWOOD RD. DEPT. 924.13 BETHESDA MD 20817		10400 FERNWOOD RD. DEPT. 824.13 BETHESDA MD 20817		DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE
]				•	
2. Principal Pl	ace of Business	2a. Mailing Address		10/31/1997 4. FEI Number	Applied For
21	ere or promisers	26		52-2055918	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.		1	60 7E A
22		27		5. Certificate of Status Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	
Ζιρ	Country	Z(p	Country	8. This corporation owes or has paid th	
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	T T		10. Name and Address of New Regist	ered Agent
	e prentice-hall corporatio	in System, Inc.	81 Name		ŀ
1201 HAYS STREET			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
Tallahassee fl 32301					
			83		
j			84 City		85 Zip Code
	**************************************				FL 2 2 P COOR
t	lo the provisions of Sections 607 0505 egistered agent, or both, in the Stale i m familiar with, and accept the obliga	2 and 607.1508. Florida Statute of Borida: Such change was au itions of, Section 607.0505, Flor	s, the above-named c uthorized by the corpo ida Statutes.	corporation submits this statement for the purporation's board of directors. I hereby accept the	ose or changing its registered e appointment as registered
SIGNATURE	Signatus' typed or proted caree of registered ages	v and blied analymble (NOTE	Registered Agent signature re	equired when reinstaling)	DATE
12,	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE	AS	DELETE	1 1 TITLE	P/D	Change Addition
NAME	BRUFF, CAROL		12 NAME	haw, William J	
STREET ADDRESS	10400 FERNWOOD RD.		13 STREET ADDRESS	0400 Femwood Rd	
CITY-ST-ZIP	BETHESDA MD 20817		1.4 DITY-ST-ZIP	Beanceda MD avgin	
TITLE	AS	DELETE	21 TITLE	3	Change
NAME	COLTON, CAROLYN			nce weeten, Joan Rector	
STREET ADDRESS	10400 FERNWOOD RD.		2.3 STREET ADDRESS	0400 Femilial Rd.	
CITY-ST-ZIP	BETHESDA MD 20817		2. 4 CITY-ST-ZIP	Bethesda MO ausin	
THTLE	AS	DELETE	3.1 TITLE	7v	Change Addition
NAME	VOGEL, FREDERICK W		3.2 NAME	hurphy, Raymond G.	
STREET ADDRESS	10400 FERNWOOD RD.		3.3 STREET ADDRESS	0400 Fernuval Rd.	
CITY-ST-ZIP	BETHESDA MD 20817		3 4. CiTY-ST-ZiP	Bethesda no ausin	
TITLE	AS	DELFTE	4 1 TITLE	>	Change Addition
NAME	STEWART, G. COPE III			Stein, Michael A.	
STREET ADDRESS	10400 FERNWOOD RD.		4.3 STREET ADDRESS	10400 Femurod Rd.	
CITY-ST-7IP	BETHESDA MD 20817			sethesda MO 812817	
TITLE	AS	DELETE		V	Change Addition
NAME	akers, james e		5.2 NAME	ruse, m. Lester Jr.	
STREET ADDRESS	10400 FERNWOOD RD.			10400 Fernusod Rd	
CITY-ST-ZIP	BETHESDA MD 20817			Bethesda MD aven	
TITLE	AS	DELETE		NV	Change
NAME	BEST, JAMES L		62 NAME R	yan, Joseph	
STREET ADDRESS	10400 FERNWOOD RD.		63 STREET ADDRESS	0400 Fernisood Rd	

14. Thereby 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 or supplimental about the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or finisted expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Feb 10 1998 8:00am

Secretary of State