

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H15944

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: MARRAKESH MOROCCAN RESTAURANT, INC.

**Current Principal Place of Business:**

1790 AVE. OF STARRS EPCOT  
P. O. BOX 22245  
LAKE BUENA VISTA, FL 32830

**New Principal Place of Business:**

**Current Mailing Address:**

1790 AVE. OF STARRS EPCOT  
P. O. BOX 22245  
LAKE BUENA VISTA, FL 32830

**New Mailing Address:**

FEI Number: 59-2438690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: CHOUFANI, RACHID,  
Address: 9103 CHARLES E LLMPUS RD  
City-St-Zip: ORLANDO, FL 32836

Title: CSD ( ) Delete  
Name: LYAZIDI, RACHID  
Address: 10414 POINTVIEW CT  
City-St-Zip: ORLANDO, FL 32836

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RASHID CHOUFANI

P

02/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date