2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000099769

I. Entity Name

MARRIOTT ENTERPRISE LLC

FILED Jan 17, 2007 08:00 AM Secretary of State

Principal Place of Business

10101 NW 83 ST TAMARAC, FL 33321 Mailing Address

10101 NW 83 ST TAMARAC, FL 33321



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	 Applied For
20-3624838	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

GONZALEZ, CONSUELO M 10101 NW 83 ST TAMARAC, FL 33321

DO NOT WRITE IN THIS SPACE

	ove named entity submits this statement for the purpose of chang gations of registered agent.	ging its registered onice or registered agent, or bot	i, in the state of Florida. I am ramiliar with, and accept
SIGNATUR	ESignature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	organisation of the man the comment of the comment	(v. t. viv. v. a Bistra and v. Barre and version sandra and section sa	-

Filing Fee is \$50.00 Due by May 1, 2007

	
9. :	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	GONZALEZ, CONSUELO M
STREET ADDRESS	10101 NW 83 ST
CITY-ST-ZIP	TAMARAC, FL 33321
TITLE	MGRM
NAME	MARRIOTT, LUIS A
STREET ADDRESS	10101 NW 83 ST
CITY-ST-ZIP	TAMARAC, FL 33321
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	•
STREET ADDRESS	
CITY-ST-ZIP	

U00000588818 01/17/07-80086-023 50.00

DO NOT WRITE IN THIS SPACE

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 1 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.

NATURE CAUCALO M GONZalez / CONSCELS GONZALEZ 01-11-07 954258-9755

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

Date

Daytime Phone #