2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000054340

MARCO POLO PIZZA LLC



FILED Apr 17, 2008 08:00 Al Secretary of State

Principal Place of Business

1523-4 CHAFFEE ROAD S JACKSONVILLE, FL 32221 Mailing Address

3299 AVALON DRIVE GREEN COVE SPRINGS, FL 32043



DO NOT WRITE IN THIS SPACE

04092008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	20-5276765

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CURRY, MARCUS E 3299 AVALON DRIVE GREEN COVE SPRINGS, FL 32043 DO NOT WRITE IN THIS SPACE

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstalling)	DATE
FILI After Ma	E NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	. <u> </u>	1000903781 200 00003 210 100 20
9.	MANAGING MEMBERS/MANAGERS	1977 JUA	**************************************
NAME STREET ADDRESS CHY-ST-ZIP	MGR CURRY, MARCUS E 3299 AVALON DRIVE GREEN COVE SPRINGS, FL 32043		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		INTHIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME			

11. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

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

pril 15, 2008

cell # 904622644