

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064142

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** MARRAKESH MOROCCAN RESTAURANT, LLC

**Current Principal Place of Business:**

1790 AVENUE OF STARS, EPCOT  
LAKE BUENA VISTA, FL 32830

**New Principal Place of Business:**

**Current Mailing Address:**

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:**

WILDER, CHARLES D  
159 LOOKOUT PLACE, STE. 101  
MAITLAND, FL 32751 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LYAZIDI, RACHID  
**Address:** 10414 POINTVIEW COURT  
**City-St-Zip:** ORLANDO, FL 32836

**Title:** MGR  
**Name:** CHOUFANI, RACHID  
**Address:** P.O. BOX 22245  
**City-St-Zip:** LAKE BUENA VISTA, FL 32830

**Title:** MGR  
**Name:** SHALHOUB, SABA  
**Address:** P.O. BOX 22245  
**City-St-Zip:** LAKE BUENA VISTA, FL 32830

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** SABA SHALHOUB

MGR

01/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date