

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # L16920

1. Entity Name
MARRAKECH, INC.



Principal Place of Business
**720 WESLEY AVE
#10
TARPON SPRINGS, FL 34689 US**

Mailing Address
**720 WESLEY AVE
#10
TARPON SPRINGS, FL 34689 US**



01072007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0162797	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**COPPERMAN, SHIRLEY
720 WESLEY AVE #10
TARPON SPRINGS, FL 34689**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	COPPERMAN, SHIRLEY
STREET ADDRESS	720 WESLEY AVE #10
CITY-ST-ZIP	TARPON SPRINGS, FL 34689

TITLE	V
NAME	SIGMUND, STEEN
STREET ADDRESS	720 WESLEY AVENUE, #10
CITY-ST-ZIP	TARPAN SPRINGS, FL 34689

TITLE	
NAME	
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CITY-ST-ZIP	

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U00000731536
05/09/07-80008-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental report is true 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shirley Copperman* 4/24/07 727-942-2218
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #