## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 17, 2008 08:00 Al Secretary of State **DOCUMENT # P02000061170** 1. Entity Name MARRIOTT WORKS, INC. Mailing Address Principal Place of Business **8637 70TH STREET** 8637 70TH STREET PINELLAS PARK, FL 33782 PINELLAS PARK, FL 33782 US 04052008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0459818 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MARRIOTT, DOUGLAS W 8637 70TH STREET PINELLAS PARK, FL 33782 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) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MARRIOTT, DOUGLAS W NAME 8637 70TH STREET STREET ADDRESS PINELLAS PARK, FL 33782 CITY-ST-ZIP TITLE NAME STREET ADDRESS C114 - S1 - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby 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.

MARRIOT

SIGNATURE:

NAME STREET ADDRESS

> بحسورت( SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**