


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
7. Jul 28, 2006 8:00 am
Secretary of State

07-07-2006 90065 008 ****50.00

DOCUMENT # L04000079088 1. Entity Name ORLANDO PREMIERE CINEMA LLC	
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Principal Place of Business 3201 E COLONIAL DR ORLANDO, FL 32803	Mailing Address 109 WEST 4TH STREET BIG SPRING, TX 79720
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30012276

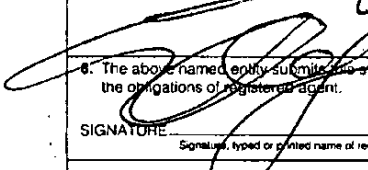


DO NOT WRITE IN THIS SPACE

05252006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 04-3793933	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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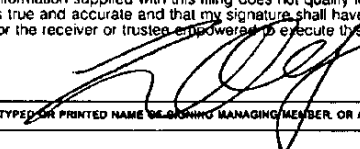
5. Name and Address of Current Registered Agent <i>GARY MOORE</i> <i>3201 E Colonial DR.</i> <i>ORLANDO, FL 32803</i>	DO NOT WRITE IN THIS SPACE
6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE</small>	

Filing Fee is \$50.00
Due by September 8, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MOORE, GARY 600 AVONDALE BIG SPRING, TX 79720
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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 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:  Date _____ Daytime Phone # _____

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE