


**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 24, 2003 8:00 am
Secretary of State

07-24-2003 90064 016 ****50.00

DOCUMENT # LO2000014347	
1. Entity Name R.A.P. Filmworks, LLC	

DO NOT WRITE IN THIS SPACE

90145984

2. Principal Place of Business 2815 Foxhall Drive East Suite, Apt. #, etc.	3. Mailing Address P.O. Box 221131 Suite, Apt. #, etc.
---	---

DO NOT WRITE IN THIS SPACE

City & State West Palm Beach, FL	City & State West Palm Beach, FL	4. FEI Number 58-2419695	Applied For <input type="checkbox"/> Not Applicable
Zip 33417	Country Palm Beach	Zip 33422	Country Palm Beach
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Roderick Powell	
Street Address (P.O. Box Number is Not Acceptable) 2815 Foxhall Drive East	
City West Palm Beach	Zip Code FL 33417

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 **Roderick Powell**
Signature, typed or printed name of registered agent and title if applicable.

7/21/03
DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS	
TITLE President / MGRM	
NAME Roderick Powell	
STREET ADDRESS 2815 Foxhall Drive East	
CITY-ST-ZIP West Palm Beach, FL 33417	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

7/21/03

*Please note business
change of address.*

Thanks.

Roderick Powell

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **Roderick Powell**

7/21/03 **561-683-6764**

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

Date

Daytime Phone #