

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000065068

FILED
Jul 08, 2008
Secretary of State

Entity Name: R.T.M ENTERTAINMENT LLC.

Current Principal Place of Business:

318 INDIAN TRACE
623
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

318 INDIAN TRACE
623
WESTON, FL 33326 US

New Mailing Address:

POX 671
671
NORTH MIAMI BEACH, FL 33160 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ANTHONY, PACE T
318 INDIAN TRACE
623
WESTON, FL 33326 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: MGRM () Delete
Name: PACE, ANTHONY T
Address: 1750 OSPREY BEND
City-St-Zip: WESTON, FL 33326 US

Title: MGRM () Delete
Name: PACE, LOUIS F
Address: 1283 NW 163RD TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: MGRM () Delete
Name: KYLE, RONNIE
Address: 26 SHINNECOCK TRAIL
City-St-Zip: MEDFORD LAKES, NJ 08055 US

Title: MGRM () Delete
Name: FAKIRI, WALLI A
Address: 19058 SW 17 COURT
City-St-Zip: MIRAMAR, FL 333029 US

Title: MGRM () Delete
Name: PETZKE, LEONARD J
Address: 194 FELS POND RD. /PO BOX 541
City-St-Zip: MASHPEE, MA 02649 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANTHONY PACE

RA

07/08/2008

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