


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 24, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000001775 1. Entity Name RAVE MOTION PICTURES PENSACOLA II, L.L.C.	
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Principal Place of Business 3333 WELBORN STREET, SUITE 100 DALLAS, TX 75219	Mailing Address 3333 WELBORN STREET, SUITE 100 DALLAS, TX 75219
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DO NOT WRITE IN THIS SPACE



07052006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2603048	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by September 6, 2006

000000572163
07/25/06-80017-025 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAVE REVIEWS CINEMAS, L.L.C. 3333 WELBORN STREET, SUITE 100 DALLAS, TX 75219
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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: *[Signature]* Date: 7/5/06 Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE