				_imited	i Liabili	ty Com	pany will be	e	•	4	
LIMITE	t to a \$ 40 D LIABILIT ANNUAL R 199	TY COMPAI	-750	F	FILED 99 APR 20 AH 10: 12						
FILING \$ 188.	FEE Annu	ual Report S ke Check P			V. 4564	Viction contain 5 vives					
Name and Mailing Address of Limited Liability Company DOCUMENT # M9700000403								TÄLÄE	MSSFE, FL	ORIDA	
R.C.P. ENTERTAINMENT, L.L.C. 3953 24TH AVENUE FORT GRATIOT MI 48059								1a. Principal Place of Business Address 3953 24TH AVENUE FORT GRATIOT MI 48059			
2 Principal Place of Business 2a. Mailir					ng Address			3. Date Organiz	ed or Qualified	3a. State of	f Formation
Suite, Apt. #, etc. Suite,					pt. #, etc.			07/09/1	997	MI	· <u>-</u>
City & State City &					ate			Applied For			Applied For Not Applicable
Zip	Zip Country Zip				Country			5. Date of Last Report 05/04/1998		Certificate of Status Desired S8.75 Additional Fee Required	
	7. Name	and Address o	of Current R	egistered	Agent		8. Name	Name and Addres	s of New Regis	tered Agent/(Office
LEA, KRISTIAN 2 VIA DE LUNA DRIVE PENSACOLA BEACH FL 32561							Street Address (I	etc. Zip Code			
its register		istered agent, or	r both, in the S								ourpose of changing cept the appointment
SIGNATU	JRE	(flesjetered Ag	ре (Ассерта (Ар	guersi sait, {f	a Kit. Heyetinek	a Agenti siğni itize	i desputast When describint is		JATE		
10. Title							ss Street Address		City.	State and Zip	o Code
MGR	LEWIS,	ERVIN	E SR		3953	24TH	AVENUE		FORT G	GRATIOT	r M I
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...ereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. If urther certify that the information indicated on this annual 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, and that my name appears in Block 10, or on an attachment with an address.

Ervin E. Lewis Sr. Owner

SIGNATURE: &