2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000025781

1. Entity Name LOTSLOTS, L.L.C.



Principal Place of Business

2240 PALM BEACH LAKES BLVD

SUITE 400 WEST PALM BEACH, FL 33409 Mailing Address

2240 PALM BEACH LAKES BLVD. SUITE 400

WEST PALM BEACH, FL 33409

FILED Apr 19, 2006 08:00 AM Secretary of State



04072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 1 32-0087571 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

MINNS, MYLES 2240 PALM BEACH LAKES BLVD., STE 400 WEST PALM BEACH, FL 33409

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8. The above named entity submits this statement for the purpose of changin	ng 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		;	
Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)		DATE

Filing Fee is \$50.00 Due by May 1, 2006

CITY-ST-ZIP

U0000U518648 05/02/06-80020-019 50.00

MANAGING MEMBERS/MANAGERS 9. MGRM TITLE MINNS, MYLES NAME STREET ADDRESS 2240 PALM BEACH LAKES BLVD, STE 400 WEST PALM BEACH, FL 33409 CITY-ST-ZIP \$)TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THTLE NAME STREET ADDRESS CITY-ST-ZiP MAME STREET ADDRESS CITY-ST-ZIP SITLE NAME STREET ADDRESS

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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: Managing

Myles Minns,
Managing Member 4-17-011

Daytime Phone if