2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

of the corporation or the receiver or trustee empowered to exec changed, or on an attachment with an address, with all other life

SIGNATURE:

FILED Jan 20, 2006 08:00 AM DOCUMENT #L33229 * 1. Entity Name **Secretary of State** L. R. S. TENNIS, INC. Mailing Address Principal Place of Business C/O LAWRENCE SAGEL C/O LAWRENCE SAGEL 4646 WHITE CEDAR LANE 4646 WHITE CEDAR LANE DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445 CR2E034 (11/05) 01122006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0156121 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAGEL, LAWRENCE DO NOT WRITE 4646 WHITE CEDAR LANE DELRAY BEACH, FL 33445 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Rogistered Agent signature required when reinsteting) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SAGEL, LAWRENCE STREET ADDRESS 4646 WHITE CEDAR LANE U00000393238 01/25/06-80012-012 150.00 CITY-ST-ZIP DELRAY BEACH, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET AGORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 or supplemental/report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if