

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 03, 2002 8:00 am
Secretary of State

04-03-2002 90037 015 ***150.00

DOCUMENT # P98000091601
1. Entity Name
G & A Tennis Management, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2366 NW 30 Rd
Suite, Apt. #, etc.

3. Mailing Address
2366 NW 30 Rd
Suite, Apt. #, etc.

80058386

DO NOT WRITE IN THIS SPACE

City & State
BOCA RATON
Zip
33431
Country

City & State
BOCA RATON
Zip
33431
Country
US

4. FEI Number
65-081886
Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Moussette Gregory
Street Address (P.O. Box Number is Not Acceptable)
2366 NW 30 Rd
City
BOCA RATON FL Zip Code
33431

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

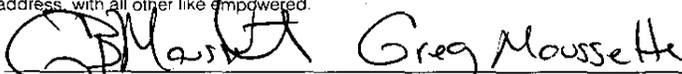
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

| | | | |
|--|--|--|---------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P Moussette, Gregory 2366 NW 30 Rd BOCA RATON 33431 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  Greg Moussette
Date: 3/26/02 Daytime Phone #: 561-883-6120

CR2E034B (12/01)