## 2002 UNIFORM BUSINESS REPORT (UBR) P9900066956 **DOCUMENT #** 1. Entity Name

E.T.'S WORLD TENNIS, INC.

Principal Place of Business

PMB 383 11231 N US HWY 1

Suite, Apt. #, etc.

City & Sate

NORTH PALM BEACH FL 33408

2. Principal Place of Business
250 Appleton

· Mailing Address

3. Mailing Addres

2501

L City **(**State

PMB 383

11231 N US HWY 1

NORTH PALM BEACH FL 33408

**FILED** May 22, 2002 8:00 am § Secretary of State 05-22-2002 90259 022 \*\*\*150.00

RUITEDWO



DO NOT WRITE IN THIS SPACE

	in bea	ch	FL	Will Palm Be	rach	FL	4. FEI Nu	mber 65-0	944497			pplied For ot Applicable	
334	3403 Country			z133.403	Country		5. Certific	ate of Status D	esired		75 Add	litional	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent							
DUMAS, PIÈRRE-HENRI E						Nare erre-Henri & Dun as Street Aericess (P. ABOX Number is Not Aerceptable)							
PMB 383						2501 George Con Consider							
11231 N	US HWY 1				•					•			
NORTH F	PALM BEACH I		1 1				<u></u>						
						سم ال	n B	each		FL   ¹	<b>38</b> 6	103	
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.													
$\overline{P}$ $1L$ $1L$													
SIGNATURE Their Henri Colon A129/02													
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE													
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00													
Tax filing requirement and elects to do so.  After May 1, 2002 F						se will be \$550.00				_		May Be	
(See criteria on back)							e	Trust Fund Co	ntribution.		Added	to Fees	
11. OFFICERS AND DIRECTORS 12								NS/CHANGES	TO OFFICERS	AND DID	CTODS	10144	
TITLE	D			☐ Delete	TITLE		المال	NO/OFIANGES	10 OFFICENS	- 4	Change		
NAME	DUMAS, PIERRE-HENRI				NAME		Appleton CT  nm Beach, FL 33403  Dunas  Appleton Cr  nm Beach, FL 33403			<b>/</b>	Jilange	Addition	
STREET ADDRESS	TREET ADDRESS PMB 383, 11231 N US HWY 1					s 2601	Hople	STON OT	•			ļ	
CITY-ST-ZIP	ST-ZIP NORTH PALM BEACH FL 33408				CITY-ST-ZIP	LAT DE	um B	L) Acce	33462			}	
TITLE	D	***		☐ Delete	TITLE	1.00 17	10M_ O	aut, ro	00 700	34	Change	Addition	
NAME	JOLTZEN, TO	)BI		C) DOLOR	NAME	Tobi	Duni	<b>S</b> .		A.	znanye	Addition	
STREET ADDRESS					STREET ADDRESS	s acoi	Apple	ton Cr					
CITY-ST-ZIP	WEST PALM	BEACH FL	33410		CITY-ST-ZIP	IN D	N. M. B	park G	33403				
TITLE				☐ Delete	TITLE	V		CO-CHAIL C	<u> </u>		hange	Addition	
NAME					NAME	İ					линув		
STREET ADDRESS	-			***	STREET ADDRES	s				•			
CITY-ST-ZIP					CITY-ST-ZIP								
TITLE				☐ Delete	TITLE						hange	Addition	
NAME			•		NAME								
STREET ADDRESS	:				STREET ADDRES	s						}	
CITY-ST-ZIP				_	CITY-ST-ZIP							ĺ	
TITLE				☐ Delete	TITLE						hange	Addition	
NAME					NAME					_	<b>g</b> -		
STREET ADDRESS					STREET ADDRES	3							
CITY-ST-ZIP					CITY-ST-ZIP								
TITLE			-	☐ Delete	TITLE			_		C	hange	Addition	
NAME					NAME						•		
STREET ADDRESS					STREET ADDRESS	; <b> </b>						1	
CITY-ST-ZIP					CITY-ST-ZIP							}	
indicated (	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 12 if												

SIGNATURE:

4/29/02

CR2E034 (9/01)