## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## FILED Mar 19 1998 8:00am Secretary of State

DOOLINAENIT	44	/
DOCUMENT	#	P97000018923

TANGO	GJV, INC.					
O- as a H Dis-	4 D					
Principal Plac	e or Business	Mailing Address				
	S. Bayshore Drive	Same				
Suite						E IN THIS SPACE
Miami	, Floridda 33133				3. Date Incorporated or Qualified	
					2/28/97	
	lace of Business	2a. Mailing Address			4. FEI Number	. Applied For
	Mary Street	26 Same			65-074a205	Not Applicab.e
Suite, Apt		Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 Suite City & Stat		City & State			4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
<b>—</b>		26			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
<u>Zip</u>			Count	trv	Trust Fund Contribution LJ Added to Fees  8. This corporation owes or has paid the current year Inlangible	
24 33133	<b>├</b> ── '	29	30	. ,	Personal Property Tax due June 30. Yes No	
20100	g, Name and Address of Curre				10. Name and Address of New R	
				1 Name		
Richa	rd E. Schatz		-		10.0	1111
2200	Museum Tower		i a	Street Add	ress (P.O. Box Number is Not Accepta	(DIE)
150 W	est Plagler Street		8	13		
Miami	, Florida 33130					
			8	4 City		FL 85 Zip Code
office or r	to the provisions of Sections 607.050 agistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change w	as authorized	by the corpora	poration submits this statement for the tion's board of directors. I hereby acception	purpose of changing its registered
SIGNATURE						
SIGNATIONE	Signature, typed or printed name of registered ag-	ent and title if applicable	NOTE Registered A	geni signatura requi	red when reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13,		ADDITIONS/CHANGES TO OFFI	
TITLE	PSD	☐ DELETE	1.1 TITLE			Change Addition
NAME	Bradley A. Weiser		1.2 NAM	E [		
STREET ADDRESS	3250 Mary Street,	Suite 203	1.3 STRE	ET ADDRESS		
CiTY ST ZIP	<u> Miami, Plorida 33</u>	133	1.4 CITY	-ST-ZIP		
TITLE		L DELETE	2 1 TITLE			L Change Auditor
NAME			2.2 NAM	E J		
STREET ADDRESS			2.3 STRE	ET ADORESS		
CITY - ST - ZIP				· ST-ZIP		
TIT_E		DELETE	3.1 TITLE			☐ Change ☐ Addit
NAME			3.2 NAM	E		
STREET ADOPESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP			3 4. CITY			
7156		L. DELETE	41 TITLE			☐ Change ☐ Adoition
NAME			4. 2 NAN	IE .		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CTY-ST ZP			4.4 CITY	- ST - 21P		
TITLE		DELETE	5.1 TITLE			Change 2 4311
NAME			5.2 NAM	E		16 2/10
STREET ADDRESS			53 STRE	ET ADDRESS		7/1-1/9
011 + - S1 - 2/P			5.4 CITY	- \$1 - ZIP		10'''
TI*LE		DELETE	6.1 TITLE		00000246 -03/19/980102 ***150,00	Change 🔲 Addition
NAME			6.2 NAM	ŧ	-03/19/980102	0008
STREET ADDRESS			6.3 STRE	ET ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY			
14. I hereby a	ertity that the information supplied w	with this filling does not quali-	fy for the exem	otion stated in	Section 119 07(3)(i), Florida Statutes	further certify that the information

4. Thereby certify that the information suppried 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 annual report is supprished annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 13 if changed or on an attachment with an address.

SIGNATURE:

ONATURE AND TYPEO OR PRINTED HAME OF SIGNING OFFICER OF DIRECTOR

3/11/98 (365)46/2228 0281882