

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

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90239 010 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000052771

1. Corporation Name
SIERRA TANGO CORPORATION

Principal Place of Business
**4200 WACKENHUT DRIVE
SUITE 110
PALM BEACH GARDENS FL 33410
US**

Mailing Address
**4200 WACKENHUT DRIVE
SUITE 110
PALM BEACH GARDENS FL 33410
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1994

4. FEI Number

65-0506924

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 **10 Burlington Mall Rd.**

2a. Mailing Address
26 **10 Burlington Mall Rd.**

Suite, Apt. #, etc.
22 **Suite 245**

Suite, Apt. #, etc.
27 **Suite 245**

City & State
23 **Burlington MA**

City & State
28 **Burlington MA**

Zip Country
24 **01803** 25 **USA**

Zip Country
29 **01803** 30 **USA**

9. Name and Address of Current Registered Agent

**TAMBONE, RICHARD P
2141 S. ALTERNATE A1A, #400
JUPITER FL 33477**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
222 Lakeview Ave.

83 **17th Floor**

84 City
West Palm Beach

FL 85 Zip Code
33401

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **DVS**
STREET ADDRESS **TAMBONE, LORI B**
CITY-ST-ZIP **4200 WACKENHUT DR., STE 110
PALM BEACH GARDENS FL**

TITLE ☐ DELETE
NAME **DPT**
STREET ADDRESS **TAMBONE, RICHARD P**
CITY-ST-ZIP **4200 WACKENHUT DR., STE 110
PALM BEACH GARDESN FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **D**
1.3 STREET ADDRESS **10 Burlington Mall Rd., Suite 245**
1.4 CITY-ST-ZIP **Burlington MA 01803**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **DPVST**
2.3 STREET ADDRESS **222 Lakeview Ave., 17th Floor**
2.4 CITY-ST-ZIP **West Palm Beach FL 33401**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental 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 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 or Block 13 if changed, or as an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-99

781-270-0244

CR2E034 (11/98)