2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000371

Entity Name: DRTANGO, INC.

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
30 MANSELL ST. SUITE 215 ROSWELL, GA 30076					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
30 MANSELL ST. SUITE 215 ROSWELL, GA 30076					
FEI Number:	58-2487181	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cเ	rrent Registered Agent:	Name and Address	of New Registered Agent:	
LARA, ELEAZAR 153 S.W. 164TH AVENUE PEMBROKE PINES, FL 33027 US					
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:					
	Electronic	Signature of Registered Agent	į	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND				ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CHRM () E ESTRADA, ROBE 12000 WILDWOO ROSWELL, GA	DD SPRINGS DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () E ESTRADA, ROBE 12000 WILDWOO ROSWELL, GA	DD SPRINGS DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCHR () E SCHROEDER, D 4595 LA SALLE (MARIETTA, GA 3	СТ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS () E SCHROEDER, D SV95 LA SALLE MARIETTA, GA	CT	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	T () E ZAFRA, CESAR 145 ASHTON CT ROSWELL, GA	Delete 30076	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E COGGIN, ROBER 20 ALPINE DR. NEWMAN, GA 30		Title: Name: Address: City-St-Zip:	() Change () Addition	
I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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					

SIGNATURE: ROBERT ESTRADA CEO 03/25/2008

above, or on an attachment with an address, with all other like empowered.