2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State
04-09-2007 90081 006 ****70.00

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1. Entity Name
INTERNATIONAL CLUB OF ARGENTINE TANGO OF SOUTH FLORIDA, INC.

Principal Place of Business	Mailing Address
ITAL/AME. CIVIC LEAG. BROWARD CO. 700 S. DIXIE HIGHWAY HOLLYWOOD, FL	4855 HUNTERS WAY BOCA RATON, FL 33434

02212007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	7524 BOUNTY AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: NORTH BAY VILLAGE, FL
Zip / Country	Zip: 33141 / Country

4. FEI Number: 65-0775103 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CANO, MONICA 1980 S. OCEAN DR., PH Q HALLANDALE, FL 33001	Name: MARIA LANGONE Street Address (P.O. Box Number is Not Acceptable): 12850 W. STATE RD 84 # 9-27 City: DAVIE FL Zip Code: 33325

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Maria Langone 4/5/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TERAMO, JUAN L 8877 COLLINS AVENUE #402 SURFSIDE, FL 33154	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CANO, RODOLFO 1980 S. OCEAN DR. PH Q HALLANDALE, FL 33001	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JUAN J. GOMEZ 6437 SW 132 CT. MIAMI, FL 33183	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CANO, MONICA 1980 SOUTH OCEAN DR PH-Q HALLANDALE, FL 33001	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MIGUEL GOMEZ 12850 W. STATE RD 84 # 9-27 DAVIE, FL 33325	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BUSTOS, JUAN C 7524 BOUNTY AVENUE NORTH BAY VILLAGE, FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARIA LANGONE 12850 W. STATE RD 84 # 9-27 DAVIE, FL 33325	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juan L. Gomez 4/5/07 305-936-5731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #