

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90385 048 ***150.00

DOCUMENT # P00000085929

1. Entity Name
TANGA ASSET MANAGEMENT, INC.

Principal Place of Business

**8760 SW 84TH ST
 MIAMI FL 33173**

Mailing Address

**8760 SW 84TH ST
 MIAMI FL 33173**

2. Principal Place of Business

46 WATERWAYS DRIVE

Suite, Apt. #, etc.

3. Mailing Address

46 WATERWAYS DRIVE

Suite, Apt. #, etc.

City & State

KEY LARGO, FLA

City & State

KEY LARGO, FLA

Zip

33037

Country

MONROE

Zip

33037

Country

MONROE

4. FEI Number

65-1038161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

PEREZ, JR, REYNALDO J

8760 SW 84TH ST

MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ Delete
 NAME **PEREZ, REYNALDO J JR**
 STREET ADDRESS **11440 NORTH KENDALL DRIVE SUITE 206**
 CITY-ST-ZIP **MIAMI FL 33176**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **8760 SW 84th Street**
 CITY-ST-ZIP **Miami, FL 33173**

TITLE ☐ Change ☒ Addition
 NAME **VICE-PRE**
 STREET ADDRESS **PEREZ, ELBA E.**
 CITY-ST-ZIP **8760 SW 84th Street**
Miami, Florida 33173

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 11 or Block 12 if changed, or on an attachment with an address) with all other like empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

X 4/9/02 (800) 601-9166

Daytime Phone #

CR2E034 (9/01)