## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

## FILED Feb 03, 2001 8:00 am Secretary of State DOCUMENT # P0000090349 TANGO ENTERPRISES, INC. 02-03-2001 90021 039 \*\*\*150.00 Principal Place of Business Mailing Address 326 N. DIXIE HIGHWAY 1326 N. DIXIE HIGHWAY SUITE 10 SUITE 10 ~~~~~~~ LAKE WORTH FL 33460 LAKE WORTH FL 33460 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65 105 Not Applicable Country \$8.75 Additional 5.- Certificate of Status Desired -- -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, JOSE L Street Address (P.O. Box Number is Not Acceptable) 1326 N. DIXIE HIGHWAY SUITE 10 LAKE WORTH FL 33460 Zip Code 8. The above named entity submits in tal invent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Inta 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME RODRIGUEZ, JOSE L STREET ADDRESS 1326 N. DIXIE HIGHWAY, SUITE 10 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33460 TITLE ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplemental task the information 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 task to the supplemental task

RODRIQUEZ