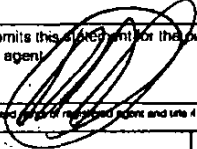
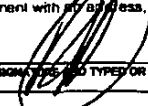


2007 FOR PROFIT CORPORATION ANNUAL REPORT

9/6/2007-90012-031-\$50.00-\$50.00

DOCUMENT # P01000062923			
1. Entity Name TANGO DEVELOPMENT, INC.			
Principal Place of Business 4519 N. WINSTON LANE SARASOTA, FL 34235		Mailing Address 4519 N. WINSTON LANE SARASOTA, FL 34235	
2. Principal Place of Business - No P.O. Box # 2328 124th DR EAST		3. Mailing Address 2328 124th DR EAST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State PARRISH, FLA		City & State PARRISH, FLA.	
Zip 34219	Country MANATEE	Zip 34219	Country MANATEE
4. FEI Number 65-1134019		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SELITTO, RICHARD R 4519 N. WINSTON LANE SARASOTA, FL 34235		7. Name and Address of New Registered Agent Name Richard R Selitto Street Address (If P.O. Box, Number is Not Applicable) 2328 124th DR. EAST City PARRISH FL Zip Code 34219	
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  President		DATE 1-5-7	
FILE NOW!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SELITTO, RICHARD R 4519 N. WINSTON LANE SARASOTA, FL 34235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Richard R Selitto 2328 124 th DR EAST PARRISH FL 34219 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HIRSCH, MARGARET R 4519 N. WINSTON LANE SARASOTA, FL 34235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARGARET R. Hirsch 2328 124 th DR EAST PARRISH, FL 34219 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200110265792 10/04/07--01032--009 ++100.00 ☐ 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
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 reports 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 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.			
SIGNATURE:  RICHARD R Selitto		DATE 1-5-7 941 713 0821	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

FILED

07 OCT -1 PM 4:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052007 Chg-P CR2E034 (12/06)

(Handwritten initials)

(Handwritten initials)