2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000092179

1. Entity Name

TANGO TECHNOLOGY, INC.



FILED Apr 23, 2007 08:00 A Secretary of State

Principal Place of Business

2655 SLASH PINE COURT TITUSVILLE, FL 32780 Mailing Address

2655 SLASH PINE COURT TITUSVILLE, FL 32780



DO NOT WRITE IN THIS SPACE

03312007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3350551 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, JOSEPH DAVID 2655 SLASH PINE COURT TITUSVILLE, FL 32780

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE MILLER, JOSEPH DAVID NAME STREET ADDRESS 2655 SLASH PINE COURT CITY-ST-ZIP TITUSVILLE, FL 32780 TITLE MILLER, BRENDA L NAME 2655 SLASH PINE COURT STREET ADDRESS CITY-ST-ZIP TITUSVILLE, FL 32780 TITLE MILLER, BRENDA L NAME 2655 SLASH PINE COURT STREET ADDRESS TITUSVILLE, FL CITY-ST-ZIP TITLE MILLER, BRENDA L NAME 2655 SLASH PINE COURT STREET ADDRESS TITUSVILLE, FL 32780 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CiTY+ST-7iP

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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 607, 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:

MATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/07

Davime Phone #