

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90823 031 ***150.00

DOCUMENT # P98000067016 1. Entity Name TANGO FEVER PRODUCTIONS, INC.					
Principal Place of Business 1484 E HALLENDALE BREACH BLVD HALLANDALE, FL 33009				Mailing Address 1484 E HALLENDALE BREACH BLVD HALLANDALE, FL 33009	
2. Principal Place of Business 9905 N.W. 95th Circle Suite, Apt. #, etc. UNIT 2		3. Mailing Address 9905 N.W. 95th Circle Suite, Apt. #, etc. UNIT 2		 ☐ CHECK HERE IF MAKING CHANGES	
City & State Miami FL		City & State Miami FL			
Zip 33172		Zip 33172			
Country U.S.A		Country U.S.A			
4. FEI Number 65-0855727				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NEL GIRALDE, JORGE BLDG 3 APT 207 701 THREE ISLAND BLVD HALLANDALE, FL 33009-2822			7. Name and Address of New Registered Agent Name JORGE NEL GIRALDO Street Address (P.O. Box Number is Not Acceptable) 9905 N.W. 95th Circle UNIT 2 City Miami FL Zip Code 33172		
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 required if applicable. (NOTE: Registered Agent signature required when withdrawing)					
DATE: 4-28-03					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$350.00 Make Check Payable to Florida Department of State			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	PD ☐ Delete GIRALDO, JORGE NEL BLD 3 APT 207 701 THREE ISLAND BLVD HALLANDALE, FL 330092822		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 9905 N.W. 95th Circle #2 Miami, FL 33172	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			Date: 4-28-03 305 552-6616		

CR2E034 (10/02)