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## **FILED** Apr 24, 2003 8:00 am Secretary of State

**2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)** 

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TANGO GRILL PARRILLADA OF AVENTURA INC.

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City & State  City & State  City & State  City & State  Country  Country  Country  Country  Country  Country  Country  Country  Country  S. Certificate of Satus Desired Fee Required S. 7. Additional Fee Required Fee Required Cond. Land Address of Current Registered Agent  Namo  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 agent, or both, in the State of Florida. I am familiar with, and acceptable in the obligations of registered agent, or both, in the State of Florida. I am familiar with, and acceptable in the obligation of registered agent, or both, in the State of Florida. I am familiar with, and acceptable in the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida.  FILE NOWIII FEE IS \$150.00  After Mover.  FILE NOWIII FEE IS \$150.00  After Mover.  FILE NOWIII FEE IS \$150.00  After Mover.	2. Principal P	lace of Business	3. Mailing Address				IBILA BARAL OBALA 10101 AIBI	1	HOI H(I 108)	
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6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  YEUNG, HING Y 4104 AURORA ST  CORAL GABLES FL 33146  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. I am familiar with, and accept the obligations of registered agent.  File NOW!!! FEL IS 150.00  After May 1, 2003 Fee will be \$55.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  NAME  SITERT ADDRESS  OTY-S1-2P  OTHERS  OTHERS OFFICERS  OTHERS OFFICERS  OTHERS OTHERS  OTHERS  OTHERS OTHERS  OT	City & State City & State				4. FEI Number 65-0938	3765	<u> </u>			
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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		ertify that the information supplied with	this filing does not qualify for				tutes. I further certify	that the in	formation	

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.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OPPOER OR DIRECTOR

Date

**SIGNATURE:**