Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90124 030 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # \$17815

1. Corporation Name

MIAMI TU TU TANGO CORP.

| Principal Place  | of Business   | Mailing Address                | Mailing Address    |                 |                     | (1021)   |                |                 |
|--|---|--------------------------------|--------------------|-----------------|---------------------|--|----------------|-----------------|
| 3250 MARY STE  | REET  | 3250 MARY STREET               |                    |                 |                     |  |                |                 |
| SUITE 203  |   | SUITE 203<br>MIAMI FL 33133    |                    |                 |                     | DO NOT WRITE IN THIS SPACE                       |                |                 |
| MIAMI FL 33133 MIAMI FL 33133 US US  |   |                                |                    |                 |                     | 3. Date Incorporated or Qualifed                 |                |                 |
| 00   |   |                                |                    |                 |                     | 12/11/1990                                       |                | -               |
| 2. Principal Pl  | lace of Business                                    | 2a. Mailing Address            |                    |                 |                     | 4. FEI Number                                    | - Ar           | oplied For      |
| 21   |   | 26                             |                    |                 |                     | 65-0238896                                       | No             | ot Applicable   |
| Suite, Apt.  | #, etc.   | Suite, Apt. #, etc.            |                    |                 |                     | 5. Certificate of Status Desired                 | ,              | Additional      |
| 22   |   |                                |                    |                 |                     | 5. Certificate of Status Desired                 | Fee Re         | equired         |
| City & State   | е .   | City & State                   |                    |                 |                     | 6. Election Campaign Financing                   | ,              | May Be          |
| 23   | <u></u>   | 28                             |                    |                 |                     | Trust Fund Contribution                          |                | to Fees         |
| Zip  | Country   | Zip '                          | Con                | ntry            |                     | 8. This corporation owes the current year        |                | □N <sub>0</sub> |
| 24   | 25  | 29                             | 30                 | ,               |                     | Personal Property Tax.                           | ☐ Yes          | □No             |
|  | 9. Name and Address of Curren                       | t Registered Agent             |                    | 81              | Name                | 10. Name and Address of New Registere            | u Agent        | _               |
| SCH  | ATZ, RICHARD E                                      |                                |                    | "               | ivaine              |  |                |                 |
|  | MUSEUM TOWER  |                                |                    | 82              | Street Addr         | ress (P.O. Box Number is Not Acceptable)         |                |                 |
|  | W. FLAGLER STREET                                   |                                |                    | 83              |                     |  | •              |                 |
|  | AI FL 33130   |                                |                    | 63              |                     |  |                |                 |
| 1710 31  |   |                                |                    | 84              | City                | F  | 85 Zip         | Code            |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes |   |                                |                    |                 | named sam           |  |                | registered      |
| office or re   | egistered agent, or both, in the State.             | of Florida. Such change was a  | authorized         | l by i          | the corporation     | on's board of directors. I hereby accept the app | ointment as re | gistered        |
| agent. I a   | m familiar with, and accept the obliga              | tions of, Section 607.0505, Fk | orida Stati        | utes.           |                     |  |                | ļ               |
| SIGNATURE  | Signature, typed or printed name of registered ager | A d table of emplicable (NOT)  | E. Banistored      | Agen            | t eigneture roguire | ad when reinstating) DATE                        |                | }               |
| 12,  |   | D DIRECTORS                    | 13.                | rygan           | r signature require | ADDITIONS/CHANGES TO OFFICERS                    | AND DIRECTO    | ORS IN 12       |
| TILE   | PSD   | DELETE                         | 1,1 TI             | πE              |                     |  | Change         | ☐ Addition      |
| NAME   | WEISER, BRADLEY A.                                  | ·                              | 1.2 N/             | WE              |                     |  |                |                 |
| STREET ADDRESS 3250 MARY STREET SUITE 20   |   | 3                              | 1.3 STREET ADDRESS |                 | ADDRESS             |  |                |                 |
| CITY-ST-ZIP  | MIAMI FL 33133                                      | •                              | 1.4 CITY-ST-ZIP    |                 |                     |  | •              |                 |
| TITLE  | DE DE   |                                |                    | 2.1 TITLE       |                     |  | ☐ Change       | Addition        |
| NAME   |   |                                | 2.2 N              | 2.2 NAME        |                     |  |                | 1               |
| STREET ADDRESS   |   |                                | 2.3 STREET ADDRE   |                 | ADDRESS             |  |                | }               |
| CITY-ST-ZIP  |   |                                | 2.4 C              | 2.4 CITY-ST-ZIP |                     |  | •              | }               |
| TITLE  | DELETE  |                                | _                  | 3.1 TITLE       |                     |  | ☐ Change       | ☐ Addition      |
| NAME   | <u> </u>  |                                | 3.2 NAME           |                 |                     |  |                |                 |
| STREET ADDRESS   | <b>)</b> .  |                                | 3.3 ST             | REET            | ADDRESS             |  |                |                 |
| CITY-ST-ZIP  |   |                                | 3.4. C             | ITY-S           | T-ZIP               | <u></u>  |                |                 |
| TITLE  |   | ☐ DELETE                       | 4.1 Π              | πE              |                     |  | ☐ Change       | ☐ Addition      |
| NAME   | • •   |                                | 4. 2 N             | AME             |                     |  |                |                 |
| STREET ADDRESS   |   |                                | 4.3 ST             | REET            | ADORESS             |  |                |                 |
| CITY-ST-ZIP  |   |                                | 4.4 CI             | TY-81           | r- ZIP              |  |                |                 |
| TITLE  | ☐ DELETE 5  |                                | 5.1 TI             | TLE             |                     |  | Change         | Addition        |
| NAME   | · · ,   |                                | 5.2 N              | AME             |                     |  |                | ł               |
| STREET ADDRESS   | •   |                                | 5.3 S1             | REET            | ADDRESS             |  |                |                 |
| CITY-ST-ZIP  |   |                                | 5.4 Ct             |                 | r-zip               |  |                |                 |
| TITLE  |   | ☐ DELETE                       | 6.1 TI             | TLE             |                     | •  | ☐ Change       | ☐ Addition      |
| NAME   | ,   |                                | 6.2 N              |                 |                     |  | •              |                 |
| OTDEET 40000000  | ,   |                                | 6.3 51             | IREET           | ADDRESS             |  |                | Y               |

14. I hereby certify that the information supplied with his 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 annual report or supplemental annual 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 12 or Block 13 if changed, or or an adachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

305-461-2228