


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

FILED
Mar 04, 2004 08:00 AM
Secretary of State

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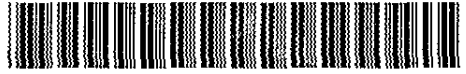
1. Entity Name
OCEAN TWO LIMITED PARTNERSHIP



Principal Place of Business Mailing Address

**2828 CORAL WAY, PH SUITE
MIAMI FL 33145** **2828 CORAL WAY, PH SUITE
MIAMI FL 33145**

\$150



MOORE CR2E003 (11/03)

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number Applied For

65-0892667 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HERNANDEZ, ANGEL
2828 CORAL WAY, PH SUITE
MIAMI FL 33145**

Name

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 office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record \$100.00

10. Amount of Capital Contributions in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
P99000004030	TRG BEACH TWO, INC.	2828 CORAL WAY, PH SUITE	MIAMI FL 33145

STREET ADDRESS	CITY - ST - ZIP

U00000088276
03/15/04-80045-005-150.00

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: *Angel Hernandez* **ANGEL HERNANDEZ** *29-04* *305-460-9900*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE