

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A00000001831**

FILED

1. Entity Name

TRG RESERVE, LTD.

02 FEB 18 PM 4: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 2828 CORAL WAY PENTHOUSE SUITE MIAMI FL 33145	Mailing Address 2828 CORAL WAY PENTHOUSE SUITE MIAMI FL 33145
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2. Principal Place of Business 3. Mailing Address

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

City & State City & State

DUE BY MAY 1, 2002

4. FEI Number **65-1059034** Applied For
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

**ROCHA, ROBERTO S
2828 CORAL WAY
PENTHOUSE 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.

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

9. Capital Contributions as Shown on record. **\$999.00** 10. Amount of Capital Contributions in FLORIDA to date. 11. MAKE CHECK PAYABLE TO 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	P00000110958 TRG RESERVE INC 2828 CORAL WAY PENTHOUSE SUITE MIAMI FL 33145	STREET ADDRESS	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

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** VICE - PRESIDENT **1/15/02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

0010012 AT

CR2E003 (9/01)

STAPLE CHECK HERE