APPROYEL

AND

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

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SIGNATURE:

A01000000588

1. Entity Name 02 MAR 27 PM 12: 10 TRG PEMBROKE ROAD II: LTD. TRE HIATUS SECRETARY OF STATE TALL AHASSEE, FLORIDA Principal Place of Business Mailing Address 2828 CORAL WAY, PENTHOUSE SUITE 2828 CORAL WAY. PENTHOUSE SUITE MIAMI FL 33145 **MIAMI FL 33145** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2002** 4. FE Number 99780 City & State City & State Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, ANGEL A Street Address (P.O. Box Number is Not Acceptable) 2828 CORAL WAY, PENTHOUSE SUITE **MIAMI FL 33145** 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, typed or printed name of registered agent and title if applicable. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 9. Capital Contributions 10. Amount of Capital Contributions \$999.00 SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. in FLORIDA to date 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. CR2E003 (9/01) P01000043399 DOCUMENT # STREET ADDRESS NAME TRG PEMBROKE ROAD II, INC. STREET ADDRESS 2828 CORAL WAY, PENTHOUSE SUITE CITY-ST-ZiP CITY-ST-ZIP MIAMI FL 33145 DOCUMENT # STREET ADDRESS STREET ADDRESS C/TY-ST-ZIP CITY-ST-7IP 300005190323--- -04/03/02--01068--003 DOCUMENT # STREET ADDRESS ****150.00 ****150.00 NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP *ČITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-2IP 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

ANGEL HERNANDEZ

VICE - PRESIDENT

//s/62
Daytime Phone #