


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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 FEB 25 PM 12:32

DOCUMENT # A01000000588

1. Entity Name
TRG HIATUS ROAD, LTD.



Principal Place of Business Mailing Address
2828 CORAL WAY, PENTHOUSE SUITE 2828 CORAL WAY, PENTHOUSE SUITE
MIAMI FL 33145 MIAMI FL 33145

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
65-1099780 Not Applicable

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



MOORE CR2E003 (11/03)

6. Name and Address of Current Registered Agent
HERNANDEZ, ANGEL A
2828 CORAL WAY, PENTHOUSE SUITE
MIAMI FL 33145

7. Name and Address of New Registered Agent
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. \$999.00

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
DOCUMENT # P01000043399
NAME TRG HIATUS ROAD INC.
STREET ADDRESS 2828 CORAL WAY, PENTHOUSE SUITE ✓
CITY-ST-ZIP MIAMI FL 33145

13. ADDRESS CHANGES ONLY
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # STREET ADDRESS
NAME CITY-ST-ZIP

STREET ADDRESS 900030593439
CITY-ST-ZIP 03/17/04--01004--005 **150.00

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STREET ADDRESS
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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

ANGEL HERNANDEZ
VICE-PRESIDENT 2-10-04 4609900
Date Daytime Phone #

SAMPLE CHECK HERE

V2M
2/25

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