


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # A01000000671

1. Entity Name
 TRIGEANT, LTD.



Principal Place of Business
 3020 N MILITARY TRAIL
 SUITE 100
 BOCA RATON, FL 33431

Mailing Address
 3020 N MILITARY TRAIL
 SUITE 100
 BOCA RATON, FL 33431

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country



02022004 Chg-LP CR2E003 (10/03)

4. FEI Number
 65-1112037

Applied For
 Yes
 No

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

6. Name and Address of Current Registered Agent

RAFFERTY, WILLIAM L JR ESQ
 1401 BRICKELL AVE
 SUITE 825
 MIAMI, FL 33131

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.

8. Capital Contributions as Shown on record. \$1,000.00

10. Amount of Capital Contributions in FLORIDA to date. \$1,000.00

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 # L01000004945
 NAME TRIGEANT LLC
 STREET ADDRESS 3020 N MILITARY TRAIL SUITE 100
 CITY-ST-ZIP BOCA RATON, FL 33431

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 CITY-ST-ZIP

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STAPLE CHECK HERE

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

Trigeant LLC, its General Partner
 SIGNATURE: By: Harry Sargeant, III, Manager 4/23/04 (561) 999-9916

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED GENERAL PARTNER Date Daytime Phone #