

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0002098 AV

DOCUMENT # A02000000722



FILED
03 APR 25 PM 4:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

1. Entity Name
TRG-OMRC, LTD.

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

Mailing Address
**2828 CORAL WAY, PENTHOUSE SUITE
MIAMI FL 33145**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DUE BY MAY 1, 2003

4. FEI Number
02-0620317

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**HERNANDEZ, ANGEL
2828 GORAL 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. **\$99.90**

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 #	P02000056239
NAME	TRG - OMRC, INC.
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE
CITY-ST-ZIP	MIAMI FL 33145
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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

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04/25/03 01045-003 **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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
VICE - PRESIDENT

Date: **4/2/03**
Daytime Phone #

SAMPLE CHECK HERE

CR2E003 (10/02)