

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # A02000001745
 1. Entity Name
 TRIGEANT EP, LTD.



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

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



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

02022004 Chg-LP CR2E003 (10/03)

4. FEI Number
 59-3770916

Applied For
 Not Applicable

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., STE. 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.

9. 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 #	LD2000035095	STREET ADDRESS	
NAME	TRIGEANT EP, LLC	CITY-ST-ZIP	
STREET ADDRESS	3020 N. MILITARY TRAIL, STE. 100		
CITY-ST-ZIP	BOCA RATON, FL 33431		
DOCUMENT #		STREET ADDRESS	
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LD 000058344
 05/07/04-80012-002 141.25

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 EP, LLC, General Partner
 SIGNATURE: By: [Signature], Harry Sargeant, III, Manager 4/23/04 (561)999-9916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE ALONG HERE