
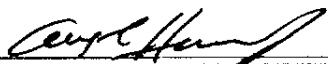


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # A03000000377					
1. Entity Name TRG HALLANDALE BEACH HOLDINGS, LTD.					
Principal Place of Business 2828 CORAL WAY, PH 5 MIAMI, FL 33143			Mailing Address 2828 CORAL WAY, PH 5 MIAMI, FL 33143		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 04-3766502	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HERNANDEZ, ANGEL 2828 CORAL WAY, PH 5 MIAMI, FL 33143			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. <b>\$999.00</b>		10. Amount of Capital Contributions in FLORIDA to date			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	L03000008626		STREET ADDRESS		
NAME	TRG HALLANDALE BEACH HOLDINGS, LLC		CITY-ST-ZIP		
STREET ADDRESS	2828 CORAL WAY, PH 5				
CITY-ST-ZIP	MIAMI, FL 33143				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS				U000000333374	
CITY-ST-ZIP				04/27/05-80003-004 150.00	
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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DOCUMENT #			STREET ADDRESS		
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NAME			CITY-ST-ZIP		
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)(f), 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 VICE-PRESIDENT		3/15/05 (305) 460-9900	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date		Daytime Phone #	



02102005 Chg-LP CR2E003 (10/03)

4. FEI Number 04-3766502 Applied For Not Applicable

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

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