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

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## DOCUMENT # A03000000738 SECRETARY OF STATE 1. Entity Name HIGE CORPORATIO TRG-ONE MIAMI HOLDINGS B, LTD. 04 MAR -5 AM 10: 49 Mailing Address Principal Place of Business 2828 CORAL WAY, PENTHOUSE SÚITE 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. MOORE CR2E003 (11/03) Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired `₩ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HERNANDEZ, ANGEL 2828 CORAL WAY, PENTHOUSE SUITE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33145** City 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 Signature, typed or printed name of registered agent and title if applicable. 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions 10. Amount of Capital Contributions \$99.90 as Shown on record. in FLORIDA to date 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 ADDRESS CHANGES ONLY L03000017262 DOCUMENT # STREET ADDRESS TRG-ONE MIAMI B, LLC NAME 2828 CORAL WAY, PENTHOUSE SUITE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF **MIAMI FL 33145** DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DOCUMENT** ₽ STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 1 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

ANGEL HERNANDEZ
VICE-PRESIDENT