

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # A03000001018 1. Entity Name TRG REGINA SQUARE, 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		3. Mailing Address		 02102005 Chg-LP CR2E003 (10/03)	
Suite, Apt #, etc		Suite, Apt #, etc			
City & State		City & State			
Zip		Zip			
Country		Country		4. FEI Number 02-0699956	
5. Certificate of Status Desired <input checked="" type="checkbox"/> S8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent HERNANDEZ, ANGEL A 2828 CORAL 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 _____ <small>Signature, typed or printed name of registered agent and Title if applicable</small>					
9. Capital Contributions as Shown on record \$990.00		10. Amount of Capital Contributions in FLORIDA to date.			
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 #	P03000079740		STREET ADDRESS		
NAME	TRG REGINA SQUARE, INC.		CITY-ST-ZIP		
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE				
CITY-ST-ZIP	MIAMI, FL 33145				
DOCUMENT #	M04000004755		STREET ADDRESS		
NAME	REGINA SQUARE VENTURE GP, LLC		CITY-ST-ZIP		
STREET ADDRESS	8 CAMPUS DRIVE				
CITY-ST-ZIP	PARSIPPANY, NJ 07054				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			ANGEL HERNANDEZ VICE-PRESIDENT Date: 3/15/05 Daytime Phone #: (305) 460-9900		

STAPLE CHECK HERE