


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # A03000001178
 1. Entry Name
 TRG - ONE OCEAN PLAZA, LTD.



Principal Place of Business Mailing Address
 2828 CORAL WAY, PENTHOUSE SUITE 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.

City & State City & State

Zip Country Zip Country



02102005 Chg-LP CR2E003 (10/03)

4. FEI Number Applied For
 55-0842936 Not Applicable

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

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HERNANDEZ, ANGEL A 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145		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.

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 #	P03000090197	STREET ADDRESS	
NAME	TRG - ONE OCEAN PLAZA, INC.	CITY - ST - ZIP	
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE		
CITY - ST - ZIP	MIAMI, FL 33145		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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DOCUMENT #		STREET ADDRESS	U00000947263
NAME		CITY - ST - ZIP	04/30/05-80108-012 150.00
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STAPLE CHECK HERE

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 **ANGEL HERNANDEZ** 3/15/05 (305) 460 9700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #