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

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SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING GENERAL PARTNER

## DOCUMENT # A03000001288 FILED\* 1. Entity Name SECRETARY OF STATE TRG - ALASKA HOLDING, LTD. 04 MAR 24 PM 2: 36 Mailing Address Principal Place of Business 2828 CORAL WAY, PENTHOUSE SUITE 2828 CORAL WAY, PENTHOUSE SUITE MIAMI FL 33144-5 MIAMI FL 33144-5 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E003 (11/03) City & State 4. FEI Number Applied For City & State 23 Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, ANGEL A Street Address (P.O. Box Number is Not Acceptable) 2828 CORAL WAY, PENTHOUSE SUITE MIAMI FL 33144-5 Zip Code City 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 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$99.90 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY DOCUMENT # £03000033560 STREET ADDRESS TRG - ALASKA HOLDING, LLC NAME STREET ADDRESS 2828 CORAL WAY, PENTHOUSE SUITE 200032106202 <del>/87/84-81854-886-\*\*158.88</del> CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144-5 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-7IE DOCUMENT # STREET ADDRESS NAME . \_ . STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 3 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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)(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

Daytime Phone #