2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

,		illay 1, 200	,	HLEU		
DOCUMENT # A0400001051 1. Entity Name TRG - FLAGLER/BISCAYNE HOLDINGS, LTD.					2005 APR 21 PM 2: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Pi	ace of Business		·	IALLAH	122FF' LEOKIDA	
2828 COR	Principal Place of Business 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 Mailing Address 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145			SUITE		
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2. Principal	Place of Business	3. Mailing Address				
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.		02102005 Chg-LP	CR2E003 (10/03)	
City & St	oto.	City & State		4. FEI Number	Applied For	
City & Si	alt	City & State			20-1304440 Not Applicable	
Zip	Country	Zip	Count	try	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Curr	ent Registered Agent			7. Name and Address of New	Registered Agent
LIEDNIAN	HERNANDEZ, ANGEL 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 Name Street Addr					
2828 CO					Street Address (P.O. Box Number is Not Acceptable)	
				City		FL Zip Code
8. The above	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 oblig	the obligations of registered agent.					
SIGNATURI	SIGNATURE Signature, typed or printed name of registered agent and title if applicable.					DATE
	9. Capital Contributions as Shown on record. \$99.90 10. Amount of Capit in FLORIDA to contributions			outions		
1	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.		NER INFORMATION	13.	, an amendmen		ANGES ONLY
DOCUMENT #	L04000048308			ET ADDRESS		
NAME STREET ADDRES	TRG - FLAGLER/BISCAYNE HOLDINGS, LLC 2828 CORAL WAY, PENTHOUSE SUITE		•	-ST-ZIP		
DOCUMENT #	MIAMI, FL 33145			ET ADDRESS		
NAME CTOSET ADDOSE			Sinc			
STREET ADDRES CITY-ST-ZIP	5		CiTY-	ST-ZIP		
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DOCUMENT /			STRE	ET ADDRESS		
STREET;ADDRES				ST-ZIP		
14. I hereby indicate the received	y certify that the information supplied ad on this report is true and accurate eiver or trustee empowered to execut	with this filing does not quali and that my signature shall h e this report as required by C	ify for the exer	nption stated in Se	ction 119.07(3)(i), Florida Statutes	. I further certify that the information ral Partner of the limited partnership or

VICE-PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE: ___