

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

05 APR 19 AM 9:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # A04000001389	
1. Entity Name TRG SUNNY ISLES V, LTD.	



Principal Place of Business 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145	Mailing Address 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145
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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 20-1547643	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HERNANDEZ, ANGEL 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145	
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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 _____
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.
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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 #	L04000063543	STREET ADDRESS	
NAME	TRG SUNNY ISLES V, LLC	CITY - ST - ZIP	
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE		
CITY - ST - ZIP	MIAMI, FL 33145		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
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CITY - ST - ZIP			

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05/11/05--01013--001 **450.00

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

SIGNATURE: Angel Hernandez **ANGEL HERNANDEZ** **VICE-PRESIDENT** 3/15/05 (305) 460-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE