2005 LIMITED PARTNERSHIP ANNUAL REPORT FILED 2005 APR 26 PM 12: 27 DOCUMENT # A0400001814

	TRG NEV	V RIVER II, LTD.	÷			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
	Principal Place of Business 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 Mailing Address 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145			IOUSE SUITE			RIZIRII SI INTI	
ļ	2. Principal P	lace of Business	3. Mailing Address Suite, Apt. #, etc.		· · · · · ·	02142005 Chg-LP CR2E003 (10/03)		
	Suite, Apt.	#, etc.						
	City & State		City & State				Applied For Not Applicable	
	Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current Registered Agent			Nome	7. Name and Address of New Registered Agent Name			
	HERNANDEZ, ANGEL A			Name				
ļ	2828 COR	28 CORAL WAY, PENTHOUSE SUITE IAMI, FL 33145			Street Address (P.O. Box Number is Not Acceptable)			
ĺ								
						FL Zip Co	ode	
	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			
	9. Capital Contributions as Shown on record \$99.00 as Shown on record 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				ADDRESS CHANGES ONLY		
	DOCUMENT # NAME	P04000157047 TRG NEW RIVER, INC.	STREET ADDRES	5				
	STREET ADDRESS CITY-ST-ZIP	2828 CORAL WAY, PENTHOUS MIAMI, FL 33145	CITY-ST-ZIP					
	DOCUMENT / NAME	F04000006717 QUEST MONSTER INC.		STREET ADDRES	67	-o White Plains Rd. # 30	5	
	STREET ADDRESS CITY-ST-ZIP	670 WHITE PLAINS RD., SUITE SCARSDALE, FL 10583	E 305	CITY-ST-ZIP	Sco	-o White Plains Rd.# 30 ars dale, NY 10583		
	DOCUMENT #	PRESS			3	•		
	STREET ADDRESS CITY-ST-ZIP					40005434861 - 05/13/0501002016 **1	1 50.00	
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	DOCUMENT # NAME				5			
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	DOC#MENT # NAME			STREET ADDRES	3			
ļ	STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		- 10 070V First Day		
	 i4. I nereby of indicated 	periny that the information supplied wi on this report is true and accurate an	un tris tiling does not quality for t	ine exemption 9 se same legal e	tated in Se fect as if m	ection 119.07(3)(i), Florida Statutes. I further certify that the made under oath: that I am a General Partner of the limited	antormation Loartnership or	

SIGNATURE: