2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9800000273 1. Entity Name						FILED			
TRG RED ROAD, LTD.					3526.25	00 JAN 27 PM 3: 24			
Principal Place of Business 2828 CORAL WAY. PENTHOUSE SUITE MIAMI FL 33145 Miami FL 33145-3214						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business 3. Mailing Address					HETC.				
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT WRITE IN THIS SPACE			
City & State City & State						4. FEI Number	65-0829867		Applied For Not Applicable
Zip	Zip Country		Zip	Cour	ntry	5. Certificate of	of Status Desired		3.75 Additional e Required
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
HERNANDEZ, ANGEL					Name				
C/O TRG RED ROAD, INC.					Street Address (P.O. Box Number is Not Acceptable)				
2828 CORAL WAY, PENTHOUSE SUITE									
MIAMI FL 33145						FL Zip Co.			Zip Code
8. The above	named entit	y submits this statement for	the purpose of changing it	s register	ed office or register	red agent, or both	, in the State of Florid	da.	
SIGNATURE .		or printed name of registered agent ar			ad Agent signature requires	d when reinstating)		DATE	DEDT OF OTHER
Capital Co as Shown		\$4,035,000.00	10. Amount of Cap in FLORIDA to		butions		11. MAKE CHECK SEE REVERSE		EE INFORMATION
	A (GENERAL PARTNER TI General Partners MA	HAT IS A BUSINESS E	NTITY M	IUST BE REGIS	TERED AND AC	CTIVE WITH THIS	OFFICE.	er.
12.		GENERAL PARTNER	.,		ADDRESS CHAN				
DOCUMENT #	P98000008917 TRG RED ROAD, INC.				EET ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP		RAL WAY, PENTHOUSE	SUITE		/-ST-ZIP	40	000031	194	943
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Street Address City - \$7 - ZIP			,	CITY	(-ST-ZIP				
DOCUMENT# NAME				STR	EET ADORESS				
STREET ADDRESS CITY-ST-ZIP					/-ST-ZIP	45			
the receiv	er or trustee	e information supplied with rt is true and accurate and t empowered to execute this	this filing does not qualify f hat my signature shall have report as required by Cha	or the exe e the sam pter 620,	Florida Statutes	ection 119.07(3)(i) nade under oath; HERNANDE PRESIDENT		urther certify Partner of the	that the information e limited partnership or
SIGNAT	OKE: _	CICHATURE AND TYPE TOP I	POINTED NAME OF SIGNAL CENT	DAL DACTAL	VICE-	PIKE MANAGE	Pate	Davdir	ne Phone #