

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000480

1. Entity Name

TRG WILDWOOD, LTD.

Principal Place of Business

2828 CORAL WAY, PENTHOUSE SUITE  
MIAMI FL 33145

Mailing Address

2828 CORAL WAY, PENTHOUSE SUITE  
MIAMI FL 33145

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0911058

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

HERNANDEZ, ANGEL  
2828 CORAL WAY, PENTHOUSE SUITE  
MIAMI FL 33145

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

\$990.00

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

## 12. GENERAL PARTNER INFORMATION

DOCUMENT # P99000027324  
NAME TRG WILDWOOD, INC.  
STREET ADDRESS 2828 CORAL WAY, PENTHOUSE SUITE  
CITY-ST-ZIP MIAMI FL 33145

## 13.

## ADDRESS CHANGES ONLY

STREET ADDRESS

300004219703-5  
-05/16/01-01050--007

CITY-ST-ZIP

\*\*\*150.00 \*\*\*150.00

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/16/01

(305) 460-9900

Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

01 MAY - 1 AM 11:13  
ATLANTA, GA  
01049100

CR2E003 (11/00)