2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 14, 2005 8:00 am Secretary of State DOCUMENT # L03000017263 04-14-2005 90025 001 ****55.00 1. Entity Name TRG-ONE MIAMI A, LLC Principal Place of Business Mailing Address 20032450 2828 CORAL WAY, PENTHOUSE SUITE 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02102005 Chg-LLC CR2E083 (10/03) City & State City & State 4. EEI Number Applied For NOT APPLICABLE Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, ANGEL Street Address (P.O. Box Number is Not Acceptable) 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 City 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 Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME TRG-ONE MIAMI HOLDING B, LTD. NAME STREET ADDRESS 2828 CORAL WAY STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33145 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filling 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

ANGEL HERNANDEZ

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADDRESS

CITY-ST-ZIP

VICE-PRESIDEN'

FILED