

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**


FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90311 038 ***158.75

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02102005 Chg-P CR2E034 (10/03)

DOCUMENT # P00000114713		
1. Entity Name TRG - BEACH THREE, INC.		

Principal Place of Business 2828 CORAL WAY, PH 5 MIAMI, FL 33143	Mailing Address 2828 CORAL WAY, PH 5 MIAMI, FL 33143
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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

6. Name and Address of Current Registered Agent	
HERNANDEZ, ANGEL 2828 CORAL WAY, PH 5 MIAMI, FL 33143	

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. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DPT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEREZ, JORGE	NAME	
STREET ADDRESS	2828 CORAL WAY PH5	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33145	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, MATT	NAME	
STREET ADDRESS	2828 CORAL WAY PH5	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33145	CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERNANDEZ, ANGEL	NAME	
STREET ADDRESS	2828 CORAL WAY PH5	STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33145	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	HODGES, RANDALL LEE
STREET ADDRESS		STREET ADDRESS	2828 CORAL WAY - PH 1
CITY-ST-ZIP		CITY-ST-ZIP	MIAMI, FL 33145
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	THOMPSON, WILLIAM
STREET ADDRESS		STREET ADDRESS	2828 CORAL WAY - PH
CITY-ST-ZIP		CITY-ST-ZIP	MIAMI, FL 33145
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angel Hernandez **ANGEL HERNANDEZ** **VICE-PRESIDENT** 3/17/05 (205) 460-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #