


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000043399	
1. Entity Name TRG HIATUS ROAD, INC.	

Principal Place of Business 2828 CORAL WAY, PENTHOUSE SUITE MIAMI FL 33145	Mailing Address 2828 CORAL WAY, PENTHOUSE SUITE MIAMI FL 33145
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MOORE CR2E034 (11/03)

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 65-1099781	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> Delete
NAME	PEREZ, JORGE M	
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	EV	<input type="checkbox"/> Delete
NAME	ROCHA, ROBERTO S	
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	VS	<input type="checkbox"/> Delete
NAME	HERNANDEZ, ANGEL A	
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	V	<input type="checkbox"/> Delete
NAME	ALLEN, MATTHEW J	
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U00000065486	
CITY-ST-ZIP	02/25/04-80040-001 158.75	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANGEL HERNANDEZ
VICE-PRESIDENT 29-04 305 4609900
 Date Daytime Phone #