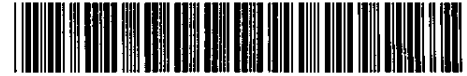


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90036 047 ***158.75

DOCUMENT # P03000095494			
1. Entity Name TRG-ALASKA COMMERCIAL, INC.			
Principal Place of Business 2828 CORAL WAY PENTHOUSE STE MIAMI FL 33145		Mailing Address 2828 CORAL WAY PENTHOUSE STE 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



MOORE CR2E034 (11/03)

4. FEI Number 75-3132552		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		7. Name and Address of New Registered Agent	
HERNANDEZ, ANGEL A 2828 CORAL WAY PENTHOUSE STE 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. 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, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	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	D <input type="checkbox"/> Delete	TITLE	DPT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEREZ, JORGE M	NAME	PEREZ, JORGE M
STREET ADDRESS	2828 CORAL WAY PENTHOUSE STE	STREET ADDRESS	2828 CORAL WAY
CITY-ST-ZIP	MIAMI FL 33145	CITY-ST-ZIP	MIAMI FL 33145
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	HERNANDEZ, ANGEL
STREET ADDRESS		STREET ADDRESS	2828 CORAL WAY
CITY-ST-ZIP		CITY-ST-ZIP	MIAMI FL 33145
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	ALLEN, MATT
STREET ADDRESS		STREET ADDRESS	2828 CORAL WAY
CITY-ST-ZIP		CITY-ST-ZIP	MIAMI FL 33145
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	BRONSON, JOYCE
STREET ADDRESS		STREET ADDRESS	2828 CORAL WAY
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
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANGEL HERNANDEZ
VICE-PRESIDENT

Date _____ Daytime Phone # _____