2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-05-2005 90058 020 ***158 75 DOCUMENT # P03000103904 1. Entity Name TRG - DOWNTOWN LOFT II, INC. 40041014 Principal Place of Business Mailing Address 2828 CORAL WAY 2828 CORAL WAY PENTHOUSE SUITE PENTHOUSE SUITE MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02102005 Chq-P City & State City & State Applied For 4. FFI Number 54-2127346 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HERNANDEZ, ANGEL A Street Address (P.O. Box Number is Not Acceptable) 2828 CORAL WAY PENTHOUSE SUITE MIAMI, FL 33145 Zip Code City FL 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P/T/D PEREZ, JOIGE M. 2828 CORAL WAY - PH1 D TITLE TITLE ☐ Delete Change Change Addition NAME PEREZ, JORGE M NAME STREET ADORESS 2828 CORAL WAY PENTHOUSE SUITE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33145 CITY-ST-ZIP MIAML FL 33145 Delete TITLE TITLE ☐ Change ROCHA, ROBERTO 2828 CURAL WAY- PH1 Addition A NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 3314S TITLE ☐ Delete TITLE ☐ Change Addition HERNANDEZ ANGEL 2828 CORAL WAY-PH1 MANU FL 33145 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete **★**Addition NAME NAME ALLEN-MATT STREET ADDRESS STREET ADDRESS 2828 CORAL WAY-CITY-ST-ZIP CITY-ST-ZIP MIAMI TITLE ☐ Delete TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change TITLE ☐ Delete ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-7IP 12. 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 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 ANDEZ. 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 empanying the PERNANDEZ.

FILED

Apr 05, 2005 8:00 am Secretary of State