2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT.# **P98000076725**

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

TRG AFFORDABLE HOUSING, INC.

Principal Place of Business 2828 CORAL WAY, PENTH. SUITE MIAMI FL 33145 2. Principal Place of Business		Mailing Address							
		2828 CORAL WAY. PENTH. SUITE MIAMI FL 33145 3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4.	FEI Number 65-0866858	}		oplied For ot Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	≯ \$8	.75 Add	ditional	
	6. Name and Address of Current	Registered Agent	-,	7.	Name and Address of New R	egistered Age	nt		
			Name			-: 	تعبد وي		
HERNANDEZ, ANGEL 2828 CORAL WAY PH			Street	Street Address (P.O. Box Number is Not Acceptable)					
	MI FL 33145					·			
			City			FL	Zip Code	e	
Tax filing r	Signature, typed or printed name of registered agen pration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
11.	OFFICERS AND	DIRECTORS	12.	A	DITIONS/CHANGES TO OFFI	ICERS AND DI	RECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D PEREZ, JORGE M 2828 CORAL WAY, PENTH. SU MIAMI FL 33145	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition	
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. 3054609500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

CITY-ST-ZIP