## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 07, 2002 8:00 am Secretary of State DOCUMENT # P98000076725 1. Entity Name 03-07-2002 90021 039 \*\*\*158.75 TRG AFFORDABLE HOUSING, INC. Principal Place of Business Mailing Address 2828 CORAL WAY, PENTH, SUITE 2828 CORAL WAY, PENTH. SUITE MIAMI FL 33145 MIAMI FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0866858 Not Applicable Zip Country Country Zip \$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 HERNANDEZ, ANGEL Street Address (P.O. Box Number is Not Acceptable) 2823 CORAL-WAY-PH= MIAMI FL 33145 City 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. SIGNATURE 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Addition NAME PEREZ, JORGE M NAME STREET ADDRESS STREET ADDRESS 2828 CORAL WAY, PENTH. SUITE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33145** ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME ROCHA, ROBERTO STREET ADDRESS STREET ADDRESS 2828 CORAL WAY PH CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33145 ☐ Delete TITLE VAS TITLE ☐ Change Addition NAME NAME HERNANDEZ, ANGEL STREET ADDRESS STREET ADDRESS 2828 CORAL WAY PH -CITY-ST-ZIP CITY-ST-ZIP MIAMI:FL=33145 = Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ■ Addition NAME STREET #DORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

changed, or on an attachment with an address, with all other like empowered

3 ANGEL HERNANDEZ

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

**FILED** 

Daytime Phone #