## 2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000761

Entity Name: T GROUP SERVICES, LLC

**Current Principal Place of Business:** 

17780 COLLINS AVENUE

2ND FLOOR

SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

17780 COLLINS AVENUE 2ND FLOOR

SUNNY ISLES BEACH, FL 33160 US

FEI Number: 26-1961361 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

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:

Title

Title

Address

Name

Electronic Signature of Registered Agent

Date

**FILED** Feb 14, 2017

**Secretary of State** 

CC0600781382

Authorized Person(s) Detail:

Title **MANAGER** TG CO MANAGEMENT, INC Name

Address 17780 COLLINS AVENUE

2ND FLOOR

CO CHAIRMAN

Address

Title

Name

TG HOLDINGS, LTD. 17780 COLLINS AVENUE

SUNNY ISLES BEACH FL 33160

SUNNY ISLES BEACH FL 33160

EXECUTIVE VICE PRESIDENT

SUNNY ISLES BEACH FL 33160

AUTHORIZED MEMBER

2ND FLOOR

CO CHAIRMAN

TRUMP, EDDIE

SUNNY ISLES BEACH FL 33160 City-State-Zip:

TRUMP, JULIUS Name

17780 COLLINS AVENUE Address

2ND FLOOR

Address

City-State-Zip:

City-State-Zip:

Title

Name

City-State-Zip:

17780 COLLINS AVENUE

2ND FLOOR

SUNNY ISLES BEACH FL 33160 City-State-Zip:

**EXECUTIVE VICE PRESIDENT** 

LIEB, JAMES Name

> 17780 COLLINS AVENUE 2ND FLOOR

Name Address

Name

Title

HIRSCH, MARK S

17780 COLLINS AVENUE

2ND FLOOR

City-State-Zip: SUNNY ISLES BEACH FL 33160

Title ASST VICE PRESIDENT TORPEY, CARITE L

17780 COLLINS AVENUE Address

2ND FLOOR

Title **ASST SECRETARY** 

FELDMAN, RICHARD

17780 COLLINS AVENUE Address

2ND FLOOR

SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip:

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**EVP** 

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES LIEB

Electronic Signature of Signing Authorized Person(s) Detail

02/14/2017

Date

## **Authorized Person(s) Detail Continued:**

Title SVP, MGRD
Name TRUMP, JOSHUA

Address 17780 COLLINS AVENUE

2ND FLOOR

City-State-Zip: SUNNY ISLES BEACH FL 33160