2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2011
Secretary of State

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Entity Name: TI CAPITAL CORPORATION

Current Principal Place of Business:

4000 ISLAND BOULEVARD, PH2
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 186
EAST BRUNSWICK, NJ 08816

New Mailing Address:

FEI Number: 38-3792948 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: ______________________________

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VPTS
Name: LIEB, JAMES M
Address: P.O. BOX 186
City-St-Zip: EAST BRUNSWICK, NJ 08816

Title: D
Name: LIEB, JAMES M
Address: P.O. BOX 186
City-St-Zip: EAST BRUNSWICK, NJ 08816

Title: DC
Name: TRUMP, EDDIE
Address: 4000 ISLAND BOULEVARD, PH2
City-St-Zip: AVENTURA, FL 33160

Title: C
Name: TRUMP, JULIUS
Address: 4000 ISLAND BOULEVARD, PH2
City-St-Zip: AVENTURA, FL 33160

Title: VPS
Name: HIRSCH, MARK S
Address: 404 PARK AVENUE SOUTH, 6TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: VPST
Name: TORPEY, CARITE L
Address: P.O. BOX 186
City-St-Zip: EAST BRUNSWICK, NJ 08816

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES LIEB EVP 04/19/2011

Electronic Signature of Signing Officer or Director — Date