2001	UNIFORM	BUSINESS	REPORT	(UBR
		DOGIITEOO		10011

Principal Place of Business 700 SLAND BOULEVARD NORTH MANI BEACH FL 33100	DOCUMENT # F9300005303 1. Entity Name 2000 ISLAND BOULEVARD, INC.					APPROVED AND FILED OI JUL 11 PM 4: 27					
Suite, Apt. #, etc. City & State City & FL Zip Code City & FL Z	7900 ISLAND BOULEVARD		7900 ISLAND BOULEVARD				SECRETARY C	F STAT FLORE	E DA	1 11 11 111111	
City & State Nome Nome Nome Nome Nome Nome Stread Address of New Registered Agent Nome City FL Zip Code City FL	2. Principal P	Place of Business	3. Mailing Address								
Stock Scales Stock	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
Secret Address of Current Registered Agent Secret Address of New Registered Agent Secret Address (P.O. Box Number is Not Acceptable) Secret Address of New Registered Agent Secret Address Secret A	City & Stat	e	City & State		4	4. FEI Number 65-0452965					
MATUS, ALAN 7800 ISLAND BOULEVARD NORTH MIAMI BEACH FL 33160 8. The above named entity submy this is humanit for the purpose of changing its registered agent, or both, in the State of Proide. 9. This corporation is eligina to seately its intergibile Tax integring equirement and elects to do so. After September 12, 2001 Fee will be \$750.00 After Addition INCE ADDITIONS/CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS ANALY AND BOULEVARD ORTH MAMB BEACH FL THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11 THE WAS THE ADDITIONS CHANGES TO OFFICERS AND DIRFORDINS IN 11	Zip	Country	Zip Country		try					8.75 Add	itional
MATUS, ALAN 7900 ISLAND BOULEVARD NORTH MIAMI BEACH FL 33160 City FL Zip Code		6. Name and Address of Current F	I Registered Agent		Name	7	7. Na	ame and Address of New Regis			
8. The above named entity submyst this shamont for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Sumulus, typed of price from the purpose of changing its registered agent and signature required when invoking DATE	7900 ISLAND BOULEVARD					dress (P.C). Bo	ox Number is Not Acceptable)			
SIGNATURE 9. This corporation is eligible to satisfy its Intemplate Tax filing requirement and elects to do so. (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME SIREST ADDRESS CITY-ST-2P NAME NAME SIREST ADDRESS CITY-ST-2P TITLE AS TORPEY, CARITE TOR					City				FL	Zip Code	,
9. This corporation is eligible to sailsy its Intangle Tax filling requirement and elects to do so. (See criteria on back) 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IN MAKE STRETA ADDRESS ON MATUS, ALAN 7900 ISLAND BOULEVARD NORTH MIAMI BEACH FL 11. VAS 11. Election Campaign Financing Trust Fund Contribution 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IN MAKE STRETA ADDRESS STRETA ADDRESS ON ON MATUS, ALAN 7900 ISLAND BOULEVARD NORTH MIAMI BEACH FL 11. TILE 11. AS 11. TILE 11. TILE 11. AS 11. ELEB, JAMES 11.	8. The above	named entity submits this statement for	the purpose of changing its	registere	ed office or re	egistered	agei	nt, or both, in the State of Florida	•	I	
Tax fling requirement and elects to do so. (See criteria on back) After September 12, 2001 Fee will be \$750.00 (See criteria on back) 10. Election Campaign Financing S.5.00 May Be Added to Fee	SIGNATURE .	Signature, typed or finted name of pigistered agent a	nd title if applicable. (NOTE:	: Registere	d Agent signature	required who	en rein	islating)	DATE		
TITLE PSD MATUS, ALAN TOTAL MATUS, ALAN MATUS, ALAN TOTAL MATUS, ALAN MATUS, ALA	Tax filing requirement and elects to do so. After September 12, 20			2001	Fee will be	\$750.00		, -			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS	LIEB, JAMES 7900 ISLAND BLVD.	□ Delete	NAMI STRE	E Et address			i	[Change	Addition
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	NAME STREET ADDRESS CITY-ST-ZIP			NAME STRE CITY	ET ADDRESS - ST-ZIP				N	W	

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 of 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.

| GNATURE: | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 213187 4320503

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: July 9, 2001

ORDER TIME : 1:33 PM

ORDER NO. : 213187-020

CUSTOMER NO: 4320503

CUSTOMER: Kay Torpey, Legal Assistant

The Trump Group

Four Stage Coach Run

P.o. Box 186

East Brunswick, NJ 08816

ANNUAL REPORT FILING

DIVISION OF CORPORATION

NAME: 2000 ISLAND BOULEVARD, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carla E. Lohi-EXT#1132

EXAMINER'S INITIALS: