2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# F96000002256

Entity Name: WILLIAMS ISLAND HOLDINGS, INC.

Current Principal Place of Business:

4000 ISLAND BLVD PH2
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

4000 ISLAND BLVD PH2
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 65-0665393 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATUS, ALAN
4000 ISLAND BLVD PH2
NORTH MIAMI BEACH, FL 33160 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: COCD ( ) Delete
Name: TRUMP, EDDIE
Address: 4000 ISLAND BLVD.
City-St-Zip: NORTH MIAMI BEACH, FL

Title: EVAS ( ) Delete
Name: LIEB, JAMES M
Address: 4000 ISLAND BLVD PH2
City-St-Zip: NORTH MIAMI BEACH, FL 33130

Title: COCD ( ) Delete
Name: TRUMP, JULIUS
Address: 4000 ISLAND BLVD PH2
City-St-Zip: NORTH MIAMI BEACH, FL

Title: EVPD ( ) Delete
Name: MATUS, ALAN
Address: 4000 ISLAND BLVD PH2
City-St-Zip: NORTH MIAMI BCH, FL

Title: AVP ( ) Delete
Name: TORPEY, CARITE
Address: 4000 ISLAND BLVD PH2
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: EVPS ( ) Delete
Name: HIRSCH, MARK
Address: 4000 ISLAND BLVD PH2
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONALD J ELBERT SVP 04/25/2006

Electronic Signature of Signing Officer or Director Date