

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003990

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: TG HOLDINGS OF DELAWARE, INC.

**Current Principal Place of Business:**

PO BOX 186  
EAST BRUNSWICK, NJ 08816

**New Principal Place of Business:**

4000 ISLAND BLVD  
PH-2  
AVENTURA, FL 33160

**Current Mailing Address:**

PO BOX 186  
EAST BRUNSWICK, NJ 08816

**New Mailing Address:**

FEI Number: 22-3333138      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: EVTD ( ) Delete  
Name: LIEB, JAMES M  
Address: PO BOX 186  
City-St-Zip: EAST BRUNSWICK, NJ 08816

Title: CD ( ) Delete  
Name: TRUMP, JULIUS  
Address: 4000 ISLAND BLVD PH #2  
City-St-Zip: WILLIAMS ISLAND, FL

Title: CD ( ) Delete  
Name: TRUMP, EDDIE  
Address: 4000 ISLAND BLVD PH #2  
City-St-Zip: WILLIAMS ISLAND, FL

Title: AVP ( ) Delete  
Name: TORPEY, CARITE L  
Address: C/O TRUMP GROUP, 4000 ISLAND BLVD  
City-St-Zip: N MIAMI BEACH, FL 33160

Title: VP ( ) Delete  
Name: CIACCHI, BETTY  
Address: 200 WEST 57 STREET  
City-St-Zip: NEW YORK, NY 10019

**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: AVP (X) Change ( ) Addition  
Name: TORPEY, CARITE L  
Address: C/O TRUMP GROUP, 4000 ISLAND BLVD  
City-St-Zip: WILLIAMS ISLAND, FL 33160

Title: SVP (X) Change ( ) Addition  
Name: ELBERT, DONALD J  
Address: 4000 ISLAND BLVD  
City-St-Zip: WILLIAMS ISLAND, FL 33160

I hereby certify that the information supplied with this filing does not qualify 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: CARITE L. TORPEY

AVP

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date