

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094898

FILED
Jul 05, 2007
Secretary of State

Entity Name: TRUMP 502, LLC

Current Principal Place of Business:

2999 NE 191ST STREET
400
AVENTURA, FL 33180 US

Current Mailing Address:

2999 NE 191ST STREET
400
AVENTURA, FL 33180 US

New Principal Place of Business:

2999 NE 191ST STREET
905
AVENTURA, FL 33180 US

New Mailing Address:

2999 NE 191ST STREET
905
AVENTURA, FL 33180 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SLYUSARCHUK, MAKSIM
2999 NE 191ST STREET
400
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

SLYUSARCHUK, MAKSIM
2999 NE 191ST STREET
905
AVENTURA, FL 33180 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:

07/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AYDOGDU, RITA
Address: 2999 NE 191ST STREET SUITE# 400
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR () Delete
Name: SLYUSARCHUK, MAKSIM
Address: 2999 NE 191ST STREET SUITE# 400
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AYDOGDU, RITA
Address: 2999 NE 191ST STREET SUITE# 408
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR (X) Change () Addition
Name: SLYUSARCHUK, MAKSIM
Address: 2999 NE 191ST STREET SUITE# 905
City-St-Zip: AVENTURA, FL 33180 US

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 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 608, Florida Statutes.

SIGNATURE: MAKSIM SLYUSARCHUK

MGR

07/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date