

LAW OFFICES
BOOSE CASEY CIKLIN LUBITZ MARTENS MCBANE & O'CONNELL
A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

BRUCE D. ALEXANDER
 FLETCHER M. BALDWIN, III
 HERALD S. BEEK
 WILLIAM W. BOOSE, JR. #4
 JOHN D. BOYUN
 PATRICK J. CASEY #4
 ALAN J. CHILIN #4
 CORY J. CHILIN
 ANNE W. COLLETTE
 ROBERT L. CRANE
 B. KEANE ENGLISH
 FREDRIC E. EPSTEIN
 MICHAEL M. GARDNER
 MICHAEL E. GORDON

WIKEL D. GREELE
 LYNDA J. HARRIS
 DANIEL A. HERSHMAN
 BRIAN B. JOSELYN
 BRUCE S. KALBITZ
 CHARLES A. LUBITZ #4
 RICHARD L. MARTENS #4
 LOUIS M. MCBANE #4
 CLAUDIA M. MEREYNA
 SHAY M. O'CONNELL
 PHILIP O'CONNELL, JR. #4
 JULIANN HICO
 SUSAN WILLIAMS

OF COUNSEL
 PHILLIP G. O'CONNELL, III
 KERRY A. GREENHALD

NORTHBRIDGE TOWER 1 - 10TH FLOOR
 515 NORTH FLAGLER DRIVE
 P.O. DRAWER 024628
 WEST PALM BEACH, FLORIDA 33402-4628
 TELEPHONE (305) 832-5900
 TELECOMEX (305) 333-4200

P15991

Division of Corporations
 P.O. Box 6327
 Tallahassee, Florida 32314

August 31, 1987 09/24/87 00016 008
 FOREIGN FILING

REGISTERED AGENT	20.00
CHARTER FILING	20.00
CERT/PHOTO COPY	35.00

TOTAL	75.00

800289528208

RE: Application by Foreign Corporation (The Trump Corporation)
 for Authorization to Transact Business in Florida

To Whom It May Concern:

Enclosed please find a check in the amount of \$75.00 along with a duly executed application for authorization to transact business. Also, enclosed is a certificate of good standing issued by a duly authorized officer of the State of New York.

We would appreciate it if you would send to the undersigned the letter of acknowledgment upon qualification, a certificate of status as well as a certified copy of same.

If you have any questions, please let me know.

Sincerely yours,

Fredric E. Epstein

Photo
 encl
 REC 4.0:001
 LVL

CITY _____
 STATE _____
 ZIP _____
 CUS# _____
 REF# _____

P15991



Florida Department of State, George Firestone, Secretary of State

**APPLICATION BY FOREIGN CORPORATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. The Trump Corporation
(Name of corporation adding the word "INCORPORATED" or "CORPORATION" if not so contained in the name at present).
2. New York
(Incorporated Under the Laws of)
3. July 30, 1980
(Date of Incorporation)
4. June 1, 1987
(Date first transacted business in Florida)
5. 725 Fifth Avenue, New York, New York 10022
(Address of Principal Office)
6. Richard L. Martens
(Name of Florida Registered Agent)
Boose Casey Clark Lubitz Martens McBane & O'Connell
Northbridge Tower 1, 19th Floor, 515 N. Flagler Drive
(Street Address in Florida of Registered Agent)
West Palm Beach Florida 33402-4626
(City) (State Florida) (Zip Code)
7. Management and operation of real property, including condominiums
(Nature of Business to be Transacted in Florida)

8. NAME OF OFFICERS

SPECIFIC ADDRESSES

<u>Donald J. Trump - President</u>	(P) <u>725 Fifth Avenue, New York, New York 10022</u>
<u>Robert S. Trump - Vice President</u>	(V) <u>725 Fifth Avenue, New York, New York 10022</u>
<u>Irwin Durben - Secretary</u>	(S) <u>200 Garden City Plaza, Garden City, NY 11530</u>
	(T) _____

NAME OF DIRECTORS

SPECIFIC ADDRESSES

<u>Donald J. Trump</u>	(D) <u>725 Fifth Avenue, New York, New York 10022</u>
<u>Robert S. Trump</u>	(D) <u>725 Fifth Avenue, New York, New York 10022</u>
<u>Irwin Durben</u>	(D) <u>200 Garden City Plaza, Garden City, NY 11530</u>
	(D) _____

9. I am familiar with and accept the obligations provided for in § 607.325

Acceptance by the Registered Agent

Agent must sign on this line

10. 200 Shares No Par Value

(Total Authorized Shares (Itemized by Class), Par Value of Shares, & without Par Value)

Two officers must sign this application

John D. Trump

Secretary or Assistant Secretary

Donald J. Trump

President or Vice President

State of New York

County of New York

The foreign instrument was acknowledged before me this 27th day

of August, 19 37 By Donald J. Trump

(Name of Officer)

President of The Trump Corporation

(Title of Officer)

(Name of Corporation)

A (An) New York

(State or Country)

Corporation, on behalf of the Corporation.

(Seal)

May B. Hildebrand
Notary Public

NOTARY PUBLIC
Notary Public, State of New York
MAINTAINED
Qualified by New York County
Commission Expires March 31, 1939

State of New York }
Department of State } ss:

I Hereby Certify, that I have made diligent examination of the index of corporation papers filed in this Department for a certificate, order or record of a dissolution of

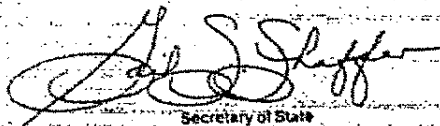
THE TRUMP CORPORATION

the certificate of incorporation of which corporation was filed July 30, 1980, with perpetual duration,

FILED
1987 SEP 18 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

and that upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 14th day of July one thousand nine hundred and eighty-seven


Secretary of State

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

**ANNUAL REPORT
1988**



FLORIDA DEPARTMENT OF STATE
John Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

P15991
THE TRUMP CORPORATION
725 FIFTH AVENUE
NEW YORK, NY 10022

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box 22

City and State 23

Zip Code 24

Change address in any way other than the correct address in item 2. Include Zip Code

3. Date incorporated or qualified to do business in Florida

09/16/1987

4. Filing of Employer Identification Number (EIN)

13-3039887

5. Date of Last Report

6. Name and Street Address of Each Officer and Director as of December 31, 1987

Name of Officers and Directors

Title

Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)

City and State

TRUMP, DONALD J.

P/D

725 FIFTH AVENUE

NEW YORK, NY

TRUMP, ROBERT S.

V/D

725 FIFTH AVENUE

NEW YORK, NY

DURBEN, IRWIN

S/D

200 GARDEN CITY PLAZA

GARDEN CITY, NY

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MARTENS, RICHARD L.

BOOSE CASSY CIKLIN LUBITZ MARTENS ET AL

NORTHBRIDGE TOWER 1, 515 N. FLAGLER DR.

WEST PALM BEACH, FL 33402

8. Name and Address of New Registered Agent

Street Address 1 (Do NOT Use P.O. Box Number) B2

Street Address 2 (Do NOT Use P.O. Box Number) B3

City and State B4

Zip Code B5

FL

I, President or the Secretary of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, hereby certify that the purpose of offering a change of registered office or registered agent or both, in this State of Florida, South Florida and authorized on registration duly signed by its board of directors on _____.

I hereby accept the appointment of registered agent, I am familiar with, and accept the provisions of, Section 607.035 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, date first transacted business in Florida

7/16/87

See signature instructions under instructions on reverse side of this form.

I certify that I am an Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.

I further certify that I understand that my Signature on This Report Shall Have the Same Legal Effect As if Made Under Oath.

Officer or Director signing this report listed in Block 6.

[Signature]

[Signature]

Date 6/7/83

Telephone Number

912-332-9000

12. Should you obtain a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED

☒

\$5 Additional Fee required for a Certificate of Status

STATE OF FLORIDA

CR0004 (1/88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

APPROVED

CORPORATION

**ANNUAL REPORT
1989**



FLORIDA DEPARTMENT OF STATE
JAN SAVIN
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
FILED

FEB 21 1990

Read Notice and Instructions on Cover Page Before Making Entries
Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

P15991 3
THE TRUMP CORPORATION
725 FIFTH AVENUE
NEW YORK, NY 10022-2519

2. Branch Office of Address of Corporation Principal Office
Check P.O. Box Number Above if NOT Listed

Street Address

P.O. Box No. 25

City and State

Zip Code

3. Mailing Address (If different from principal office, enter the street address)
Enter Zip Code in Box

4. Date of Report
09/16/1987

5. Report Number
13-3038887

6. Date of Filing
03/03/1988

7. Name and Address of Each Director and Officer as of December 31, 1989

Type	Name of Director or Officer	Address of Office (Street and City)	City and State
P/D	TRUMP, DONALD J.	725 FIFTH AVENUE	NEW YORK, NY
V/D	TRUMP, ROBERT S.	725 FIFTH AVENUE	NEW YORK, NY
S/D	DURBIN, IRWIN	200 GARDEN CITY PLAZA	GARDEN CITY, NY

REGISTERED AGENT INFORMATION

8. Name and Address of Registered Agent

MARTENS, RICHARD L.
BOOSE CASEY CIKLIN LUBITZ MARTENS ET AL
NORTHBRIDGE TOWER 1, 515 N. FLAGLER DR.
WEST PALM BEACH, FL 33402-4626

9. Name and Address of Registered Agent

Street Address (If different from P.O. Box, enter the street address)

P.O. Box No. 25

City and State

FL

Zip Code

10. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the annual report of the corporation as required by Chapter 689, F.S., and that the same has been filed for record in the office of the Secretary of State.

11. Signature of Registered Agent
The undersigned Agent, Richard L. Martens

DTT

12. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the annual report of the corporation as required by Chapter 689, F.S., and that the same has been filed for record in the office of the Secretary of State.

4/16/87

13. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the annual report of the corporation as required by Chapter 689, F.S., and that the same has been filed for record in the office of the Secretary of State.

[Handwritten signature]

[Handwritten signature]

3-12-1988

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the annual report of the corporation as required by Chapter 689, F.S., and that the same has been filed for record in the office of the Secretary of State.

CERTIFICATE OF STATUS DECLARED

**35 ASSOCIATED FIRM
NOTARIES IN A
CITY OF FLORIDA**

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

FD-350 (Rev. 1-78)

CORPORATION

ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
JIM SMITH
Secretary of State
DIVISION OF CORPORATIONS

MAR - 2 1991

Print Name and Information on Other Side Before Mailing Envelope.
Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

P15991 3
ZIP + 4 PRESORT

THE TRUMP CORPORATION
725 FIFTH AVENUE
NEW YORK, NY 10022-2519

2. If Address in Block 1 is located in any way from the correct address check P.O. Box number and use a NOT statement. The NAME of the corporation and be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. If the address is located in any way from the correct address in block 1, include Zip Code.

4. Date of Incorporation or Qualification

09/16/1987

5. Filing Number

13-3038887

6. Filing Number Assigned For
Filing Number for Amendments

7. Name and Address of Each Officer and Director

P/D TRUMP, DONALD J.

725 FIFTH AVENUE

NEW YORK, NY

V/D TRUMP, ROBERT S.

725 FIFTH AVENUE

NEW YORK, NY

S/D DURBIN, IRWIN

200 GARDEN CITY PLAZA

GARDEN CITY, NY

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

MARTENS, RICHARD L.
BOOSE CASEY CIRLIN LUBITZ MARTENS ET AL
NORTHBRIDGE TOWER 1, 515 N. FLAGLER DR.
WEST PALM BEACH, FL 33402

8. Name and Address of Former Registered Agent

9. If the agent is a corporation, do not use P.O. Box Number 31

10. If the agent is a corporation, do not use P.O. Box Number 32

City and State 34

Zip Code 35

FL

11. The undersigned hereby certifies that the information furnished in this report is true and correct to the best of his knowledge and belief, and that the undersigned is a resident of the State of Florida, and is qualified to act as a registered agent for the corporation.

12. I hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and am qualified to act as a registered agent for the corporation.

13. Signature

Signature of Registered Agent

DATE

14. Signature

Donald J. Trump

President

3/33/90

212-832-2929

SENDER DATE OF REPORT IS REQUIRED

SS Additional Fee
required for a
Certificate of State

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

**CORPORATION
ANNUAL REPORT
1991**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
JUL 11 1991
TALLAHASSEE, FL

FILING FEE OF \$61.25 REQUIRED

1. Name and Mailing Address of Corporation: **DOCUMENT #P15991 (3)**
ZIP + 4 PRESORT

**THE TRUMP CORPORATION
725 FIFTH AVENUE
NEW YORK, NY 10022-2519**

DO NOT WRITE IN THIS SPACE

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida: **09/16/1987** 4. FEI Number: **13-3038887** 5. **\$8.75 Additional Fee required for a Certificate of Status**
6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
P/D	TRUMP, DONALD J.	725 FIFTH AVENUE	NEW YORK, NY
V/D	TRUMP, ROBERT S.	725 FIFTH AVENUE	NEW YORK, NY
S/D	DURBEN, IRWIN	200 GARDEN CITY PLAZA	GARDEN CITY, NY

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**MARTENS, RICHARD L.
BOOSE CASEY CIKLIN LUBITZ MARTENS ET AL
NORTHBRIDGE TOWER 1, 515 N. FLAGLER DR.
WEST PALM BEACH, FL 33402-4626**

8. Name and Address of First Registered Agent

21 Name

22 Street Address 1 (Do NOT Use P.O. Box Numbers)

23 Street Address 2 (Do NOT Use P.O. Box Numbers)

24 City

25 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
(Registered Agent Accepting Appointment)

DATE

10. I certify that the information located on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify 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 in Block 6 in an attachment with an address.

SIGNATURE

DATE

2/8/91

Typed Name of Signing Officer: **Donald J. Trump**

Title: **President**

Telephone Number () _____

FILING FEE OF \$61.25 REQUIRED—Make Checks Payable To: Secretary of State \$8.75 Additional Fee required for a Certificate of Status

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

FILED
92 NOV -9 AM 17
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1. Name and Mailing Address of Corporation: DOCUMENT # P15991

THE TRUMP CORPORATION
725 FIFTH AVENUE
NEW YORK, NY 10022

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address: 30000000051210
Address: 111-223.75 444-88.15
City and State:
Zip Code:

3. Date Incorporated or Qualified To Do Business in Florida: 09/16/1987

4. FEI Number: 13-3038887

5. \$8.75 Additional Fee required for a Certificate of Status
CERTIFICATE OF STATUS DESIRED ☒

6. Names and Street Addresses of Each Officer and or Director

1	2	3	4
Title	Name of Officers and or Directors	Street Address of Each Officer and or Director (Do NOT Use Post Office Box Number)	City and State
P/D	TRUMP, DONALD J.	725 FIFTH AVENUE	NEW YORK, NY
V/D	TRUMP, ROBERT S.	725 FIFTH AVENUE	NEW YORK, NY
S/D	DURBEN, IRWIN	200 GARDEN CITY PLAZA	GARDEN CITY, NY

REINSTATEMENT 92-CD
Cus 138.75-sup

REGISTERED AGENT INFORMATION

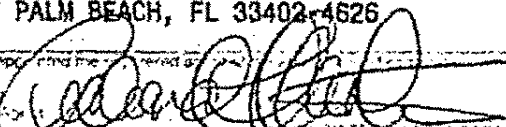
7. Name and Address of Current Registered Agent

MARTENS, RICHARD L.
BOOSE CASEY GIKLIN LUBITZ MARTENS ET AL
NORTHBRIDGE TOWER 1, 515 N. FLAGLER DR.
WEST PALM BEACH, FL 33402-4626

8. Name and Address of New Registered Agent and or Office

Name:
Street Address (Do NOT Use P.O. Box Number):
Street Address (Do NOT Use P.O. Box Number):
City and State: FL Zip:

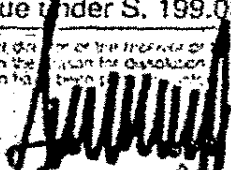
9. I, being hereby informed of the contents of this application, hereby declare that I am the owner and accept the obligations of Section 80.0505, F.S.

Signature of Registered Agent: 
Name: RICHARD L. MARTENS

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information)

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I certify that I am an officer or director of the corporation and am authorized to execute this application as provided for in chapter 897 of 817, F.S. I further certify that when filing this reinstatement application the corporation has been dissolved, and the corporate name satisfies the requirements of section 827.0401 or 817.0401, F.S. and that all taxes owed by the corporation have been paid.

Signature of Officer or Director: 
Typed or printed name of signing officer or director: DONALD J. TRUMP
Date: 11/2/92
Daytime Phone: