2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# P33441

Entity Name: THE AMERICAN FRIENDS OF BEIT ISSIE SHAPIRO, INC.

Current Principal Place of Business:

404 PARK AVENUE SOUTH
7TH FLOOR
NEW YORK, NY 10016 US

New Principal Place of Business:

Current Mailing Address:

404 PARK AVENUE SOUTH
7TH FLOOR
NEW YORK, NY 10016 US

New Mailing Address:

FEI Number: 13-3434781 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TG MANAGEMENT, INC.
4000 ISLAND BLVD., 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

OFFICERS AND DIRECTORS:

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

Title: D ( ) Delete
Name: TRUMP, JULIUS
Address: 4000 ISLAND BLVD., N.
City-St-Zip: MIAMI BEACH, FL US

Title: D ( ) Delete
Name: TRUMP, STEPHANIE
Address: 4000 ISLAND BLVD., N.
City-St-Zip: MIAMI BEACH, FL US

Title: D ( ) Delete
Name: TODES, MARK
Address: 404 PARK AVENUE SOUTH
City-St-Zip: NEW YORK, NY 10016 US

Title: S ( ) Delete
Name: LIEB, JAMES M.
Address: 4000 ISLAND BL.
City-St-Zip: N. MIAMI BCH, FL

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK TODES TREA 04/27/2009

Electronic Signature of Signing Officer or Director — Date