

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S85325

FILED
Apr 13, 2011
Secretary of State

Entity Name: ELITE MODEL MANAGEMENT MIAMI CORPORATION

Current Principal Place of Business:

119 WASHINGTON AVENUE
SUITE 501
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

404 PARK AVENUE SOUTH
9TH FLOOR
NEW YORK, NY 10016

New Mailing Address:

FEI Number: 65-0288948 **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 32301 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: DC
Name: TRUMP, EDDIE
Address: 4000 ISLAND BLVD, PH-2
City-St-Zip: AVENTURA, FL 33160

Title: DEVP
Name: LIEB, JAMES
Address: 4000 ISLAND BLVD, PH-2
City-St-Zip: AVENTURA, FL 33160

Title: DSEV
Name: HIRSCH, MARK
Address: 404 PARK AVE SOUTH
City-St-Zip: NEW YORK, NY 10016

Title: VP
Name: DOMBROWSKI, EDWARD
Address: 404 PARK AVE SOUTH, 6 FLR
City-St-Zip: NEW YORK, NY 10016

Title: AVP
Name: TORPEY, CARITE L
Address: 4000 ISLAND BLVD, PH-2
City-St-Zip: AVENUTURA, FL 33160

Title: AVP
Name: FELDMAN, RICHARD
Address: 404 PARK AVE SOUTH, 6 FLR
City-St-Zip: NEW YORK, NY 10016

I hereby 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 all other like empowered.

SIGNATURE: CARITE L. TORPEY

AVP

04/13/2011

Electronic Signature of Signing Officer or Director

Date