2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
May 19, 2008
Secretary of State

DOCUMENT# P06000074611

Entity Name: TRACK STAR ENTERTAINMENT INC.

Current Principal Place of Business:

1942 ST. JAMES CT.
OCOEE, FL 34761 US

New Principal Place of Business:

Current Mailing Address:

1942 ST. JAMES CT.
OCOEE, FL 34761 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, CHAKA Q
1942 ST. JAMES CT.
OCOEE, FL 34761 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: CHAKA SCOTT

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SCOTT, CHAKA Q
Address: 1942 ST. JAMES CT.
City-St-Zip: OCOEE, FL 34761 US

Title: VP ( ) Delete
Name: RICHARDSON, AVRIAN
Address: 7244 WOOD HILL DRIVE
City-St-Zip: ORLANDO, FL 32808 US

Title: DIR. ( ) Delete
Name: EDMOND, MICHAEL
Address: 1717 HIALEAH STREET
City-St-Zip: ORLANDO, FL 32808 US

Title: DIR. ( ) Delete
Name: COWARD, LEON
Address: 6442 FOX BRIAR TRAIL
City-St-Zip: ORLANDO, FL 32818 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: DIR. ( ) Change (X) Addition
Name: PALMER, ANDRE
Address: 6442 FOX BRIAR TRAIL
City-St-Zip: ORLANDO, FL 32818 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 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: CHAKA SCOTT P 05/19/2008

Electronic Signature of Signing Officer or Director — Date