

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004893

Entity Name: T1 ACQUISITION CORP.**Current Principal Place of Business:**500 S BUENA VISTA ST
BURBANK, CA 91521**Current Mailing Address:**500 S BUENA VISTA ST
BURBANK, CA 91521**FEI Number:** 26-2201258**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, VP
Name KAPENSTEIN, JAMES M
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

Title TREASURER, DIRECTOR
Name GOMEZ, CARLOS A
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

Title SECRETARY, DIRECTOR
Name GAVAZZI, CHAKIRA H
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

Title ASSISTANT SECRETARY
Name SOLOMON, AARON H.
Address 1170 CELEBRATION BLVD
City-State-Zip: CELEBRATION FL 34747

Title ASSISTANT TREASURER
Name GROSSMAN, DANIEL F,
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

Title VP
Name STOWELL, JOHN A.
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

Title ASSISTANT SECRETARY
Name SALAMA, MICHAEL
Address 500 S BUENA VISTA ST
City-State-Zip: BURBANK CA 91521

Title ASSISTANT SECRETARY
Name STEED, SHANNA L.
Address 640 PAULA AVE.
City-State-Zip: GLENDALE CA 91201

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: CHAKIRA H GAVAZZI**SECRETARY****04/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date