## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F03000002070

City-St-Zip:

LAS VEGAS, NV 89147

Entity Name: TND ENTERTAINMENT, INC

FILED Oct 25, 2004 Secretary of State

y		TEICI7 MINIMEINT, IIVO.				
Current Principal Place of Business:				New Principal Place of Business:		
3010 W. CHARLESTON BLVD., STE. 100 LAS VEGAS, NV 89102				8130 BAYMEADOWS WAY WEST		
				200 JACKSONVILLE, FL 32256		
Current Mailing Address:				New Mailing Address:		
2512 WINDWOOD LANE ORANGE PARK, FL 32083				8130 BAYMEADOWS WAY WEST		
				200 JACKSONVILLE, FL 32256		
FEI Number	El Number: 88-0501321 FEI Number Applied For ( )		FEI Num	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
	NICOLE DWOOD LAN PARK, FL 32					
	named entity e of Florida.	submits this statement for the p	purpose of	changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Agent					Date	
Election Car	mpaign Financir	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DT ( PEGUES, STE 2217 AVARY D LAS VEGAS, N	)R		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P ( PEARCE, NICO 2512 WINDWO ORANGE PAR	DOD LANE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	FLOWERS, KI	) Delete M IL CANYON CT		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: NICOLE PEARCE EDIR 10/25/2004