

**2009 FOR PROFIT CORPORATION
REINSTATEMENT**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAR 31 AM 9:41

DOCUMENT # P05000120913

1. Entity Name
TKO ENTERTAINMENT GROUP, INC.



Principal Place of Business
7354 DENNY ROAD
SUITE 100
HOUSTON, TX 77040 US

Mailing Address
7354 DENNY ROAD
SUITE 100
HOUSTON, TX 77040 US



Ks

DO NOT WRITE IN THIS SPACE

REINSTATEMENT

08-09

4. FEI Number
20-3420723
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

3. Name and Address of Current Registered Agent

LINDLEY, PETER P P.A.
1200 NORTH FEDERAL HIGHWAY
SUITE 200
BOCA RATON, FL 33432

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title, applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KURTZ, GARRY
STREET ADDRESS	77 ADRIATIC BLVD
CITY-ST-ZIP	STONE CREEK, ONTARIO, CANADA, L8G5C6
TITLE	V
NAME	YANG, STEVE
STREET ADDRESS	8 NOREEN ROAD
CITY-ST-ZIP	MANSFIELD, MA 02048
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300143023993
02/06/09--01039--005 **550.00

300143023993
02/27/09--01037--003 **358.75

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IN THIS SPACE**

ENTERED AUG 28 2008

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

GARRY KURTZ NOV. 21/08 713-895-9270