PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2022 MAY 23 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FL

DOCUMENT # P09000100103

1 Corporation Name

T&R Entertainment Inc

2. Principal Office Address - No P O Box #	3 Mailing Office Address
3479 NE 163rd St Ste 1220	3479 NE 163rd St
Suite, Apt # etc	Suite Apt #, etc
	Ste 1220
City & State	City & State
North Miami FL	North Miami, FL
Zip: 33160 Country: Miami-Dade	Zip: 33160 Country: Miami-Dade

4. Date Incorporated or Qualified To Do Business in Florida: 12/14/2009

5 FEI Number: 88-1344641 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED — $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Terrence Richard

Street Address (P O Box Number is Not Acceptable): 3479 NE 163rd St Ste 1220

Suite, Apt #, Etc:

City: North Miami | State: FL | Zip Code: 33160

8 I being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607 0505 or 617 0503 F S

Signature of Registered Agent: Terrence Richard Date: 3/07/2022
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Terrence Richard	3479 NE 163rd St Ste 1220	North Miami FL 33160
P	Terrence Richard	3479 NE 163rd St Ste 1220	North Miami FL 33160

10. E-mail Address: info@kinderstaxservice.com
(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617 F S I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607 0401 or 617 0401 F S , and that all fees owed by the corporation have been paid I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817 155, F.S

SIGNATURE: Terrence Richard 3/7/2022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #