FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name K12780 (8)

SONY BROADCAST EXPORT CORPORATION

Principal Place of Business Mailing Address							i imaidift kal time ilmit inna in) (-	ince Asias Atlan 1801
5201 BLUE LA SUITE 400		1 SONY DRIVE MD-T2-2								
MIAMI FL 331: US	MIAMI FL 33126 US		PARK RIDGE NJ 07656				3. Date Incorporated or Qualified 01/22/1988 03/24/			1995
2. Principal Plac	ce of Business	2a. Mailing Address	5				4. FEI Number 22-2867168		-	Applied For Not Applicable
1		Suite, Apt. #, et	 tc						\$8.	75 Additional
Suite, Apt. #,	, etc	27					5. Certificate of Status Desired	LJ		e Required
City & State		City & State					6. Election Campaign Financing		•	.00 May Be
3		28			-		Trust Fund Contribution 8. This corporation has liability to			ded to Fees
Žφ	Country	Zip	20	Country				erintangibieit es ∏No	ax under	8 188.032,
4	25 g. Name and Address of Curren	29 t Registered Agent	30	I			10. Name and Address of New		Agent	
	g, Name and Address of Control			81	Nami	0				
C T COS	RPORATION SYSTEM			82	Stree	et Address	s (P.O. Box Number is Not Accept	able)		
	OUTH PINE ISLAND ROAD									
	TION FL 33324			83						
. =				84	City				85	Zip Code
	the provisions of Sections 607.0502							Fi	- l	to registered offi
familiar with	the provisions of Sections 607.0502 ad agent, or both, in the State of Florin, and accept the obligations of, Sections, and accept the obligations of, Sections, types or procedures of registers the control of the con	ian Bu7.0505, Florida St	aures.				ner, rendating	DATE:		
12.	OFFICERS AN	D DIRECTORS		13.			ADDITIONS/CHANGES TO O	FFICERS AN	ID DIREC	
TITLE	PD	☐ DELE I	Ŀ	1 TITLE					L) Chan	ar, Ct yournan
NAME	ADAMO, GLENN			1.2 NAMÉ 1.3 STREFI	I ADDAGE C					
STREET ADDRESS	5201 BLUE LAGOON DRIVE MIAMI FL 33126			1.4 City - S		23				
CITY-ST-ZIP TITLE	MIAMI PL 33120	DELET		2 1 1016	31-311				☐ Char	ge 🔲 Addition
NAME	nees, kenneth L			2.2 NAME						
STREET ADDRESS	5201 BLUE LAGOON DRIVE			2357468	r addres	58				
CITY-ST-ZIP	MIAMI FL 33126			2.4 CITY -	ST - 7/P				<u> </u>	- Manager
TITLE	TAS	DELFT	I l	3 1 Tille		D		المسام	Char	ige 🔀 Addition
NAME	HAMMANG, DANIEL F.			3 2 NAME		00	NISHI, TOSHIH ROI BLUE LAGOOM	I KO I New	<u> </u>	
STREET ADDRESS	5201 BLUE LAGOON DRIVE			3.3 STREE		22 -23	liami , FLORIDA	マネージ	16	
CITY - ST - ZIP	MIAMI FL 33126	DELE!	TE	3.4 C/TY - 4.1 T/FLE			ITH IT I FOR IDA	27.7.10	Chai	nge 🔲 Addition
TITLE !	D Steinberg, Charles			4.2 NAME						
STREET ADDRESS	5201 BLUE LAGOON DRIVE			43 STHEE		SS				
CITY-ST-ZIP	MIAMI FL 33126			4.4 CHY -	ST-71P					
TITLE	D	☐ DELF	lŧ	5 1 1 TLE					☐ Cha	nge 🔲 Addition
NAME	HIROSHIGE, YOSHINORI			5.2 NAME				•		
STREET ADDRESS	5201 BLUE LAGOON DRIVE	STE 400		53STHEE		SS				
CITY - ST - ZiP	MIAMI FL 33126	DELE		54 C(1) - 6 1 Till ($+_{v}$			Cha	nge 🔀 Additio
TITLE	D TOURISM MICHAEL	DELE	. 1 .	6.2 NAVIS		M	OSES, ROBERT 201 BLUE LAGOON D			- -
NAME STREET ADDRESS	TSURUMI, MICHIAKI 5201 BLUE LAGOON DRIVE	STF 400			Fradere	55 52	201 BLUE LAGOON D	RIVE		
	MANUEL 22126			6.4 CiTy -	ST 7IP	1 77	18ML FL 33126			
14. I do heret	by certify that the information supplied	with this filing is volunta	arity furnishe	and do	es not	qualify fo	or the exemption stated in Section :	119 07(3)(k), the same le	Florida S aal effect	itatutes. I further as if made unde
certify that	it the information indicated on this abi	nual report or supplemel noration or the receiver o	or trustee er	npowered	to exe	ecute this	report as required by Chapter 607	, Florida Sta	tutes; an	d that my name
appears in	n Block 12 or Block 13 if changed, or	on an attachment with								
SIGNAT	riige. //w/v	1/Hlle	ميد	160B	2017	rH.	Moses 4/9/	96 3	13 - 8	33-6451
SIGNAL	SIGNATURE AND TYPED	OR PRINTED NAME OF SIGNIN	IG OFFICER O	A DIRECTO	R		Div.		Daytmes	Phone #