2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000026532

Address:

City-St-Zip:

209 REDWOOD SHORES PARKWAY

REDWOOD CITY, CA 94065

FILED Nov 12, 2004 Secretary of State

20011		1000020002			ocorciary or otate	
Entity Nar	ne: TIBURO	N ENTERTAINMENT, INC.				
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
2301 LUCI STE 395 MAITLANE	EN WAY), FL 32751	US				
Current M	ailing Addre	ss:	New Maili	New Mailing Address:		
2301 LUCI STE 395 MAITLANE	EN WAY), FL 32751	US	209 REDW	ELECTRONIC ARTS INC., LEGAL DEPT. 209 REDWOOD SHORES PARKWAY, 205-7 REDWOOD CITY, CA 94065 US		
FEI Number:	59-3232857	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
2301 LUCI MAITLAND The above	ENTERTAINI EN WAY SUI), FL 32751 I	TE 395 US	rpose of changing i	ts registered	l office or registered agent, or both,	
	of Florida.					
	Electro	nic Signature of Registered Ager			Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	O (LEE, PAUL 4330 SANDEF APOPKA, FL) Delete RSON WAY	Title: Name: Address: City-St-Zip:	LEE, PAUL	(X) Change()Addition N WAY, SUITE 395 FL 32751 US	
Title: Name: Address: City-St-Zip:	KENNEDY, RU 209 REDWOO) Delete JTH A DD SHORES PARKWAY ITY, CA 94065	Title: Name: Address: City-St-Zip:	BENE, STEP 209 REDWC	(X) Change ()Addition HEN G IOD SHORES PARKWAY CITY, CA 94065	
Title: Name:	T (NEIDER, BRY) Delete AN	Title: Name:		() 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.

Address:

City-St-Zip:

SIGNATURE: STEPHEN G. BENE S 11/12/2004