


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F00000006582						FILED 06 MAY -1 PM 4:44 SECRETARY OF STATE TALLAHASSEE, FLORIDA REINSTATEMENT 05-06	
1. Entity Name SONY AMERICAS HOLDING INC.				Principal Place of Business 550 MADISON AVENUE, 35TH FLOOR NEW YORK, NY 10022			
Mailing Address C/O SCA LEGAL 550 MADISON AVENUE, 27TH FLOOR NEW YORK, NY 10022				2. Principal Place of Business			
3. Mailing Address				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 95-4750499				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			
7. Name and Address of New Registered Agent				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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. <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 30%;"> SIGNATURE: <i>Laura R. Dunlap</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: center;"> Laura R. Dunlap as its agent </div> <div style="width: 20%; text-align: right;"> 5/1/06 <small>DATE</small> </div> </div>							
FILE NOW!!! FEE IS \$900.00							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAITO, TADASHI 1 SONY DRIVE PARK RIDGE, NJ 07656	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Nicole K. Seligman 550 Madison Avenue New York, NY 10022	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP HALBY, KAREN L 555 MADISON AVENUE NEW YORK, NY 10022	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP KOBER, STEVEN E 550 MADISON AVENUE NEW YORK, NY 10022	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TOKUNAKA, TERUHISA 6-7-35 KITASHINAGAWA SHINAGAWA-KU, JAPAN 141,	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPT Mary Jo V. Green 550 Madison Avenue New York, NY 10022	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARIKAWA, MASAKAZU 6-7-35 KITASHINAGAWA SHINAGAWA-KU, JAPAN 141,	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Howard Stringer 550 Madison Avenue New York, NY 10022	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROTH, STEPHANIE H 555 MADISON AVENUE NEW YORK, NY 10022	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>Steven E. Kober</i>				Steven E. Kober 4/28/06 212-833-6918 <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

Sony Americas Holding Inc.
Document #F00000006582

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Directors

Name

Nobuyuki Oneda, Chairman

Hirotoishi Watanabe

Address

550 Madison Avenue, New York, NY 10022

550 Madison Avenue, New York, NY 10022



CORPORATION SERVICE COMPANY

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ACCOUNT NO. : 072100000032

REFERENCE : 072704 4377650

AUTHORIZATION :

COST LIMIT : \$ 900.00

[Handwritten signature]

ORDER DATE : April 28, 2006

ORDER TIME : 2:18 PM

ORDER NO. : 072704-005

CUSTOMER NO: 4377650

REINSTATEMENT

NAME: SONY AMERICAS HOLDING INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS _____

RECEIVED
06 MAY - 1 PM 2:50
CIVIL DIVISION
TALLAHASSEE, FLORIDA