

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1062

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 NOV -3 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 824831

1. Corporation Name

SONY CORPORATION OF AMERICA

Principal Place of Business

550 MADISON AVENUE
NEW YORK NY 10022

Mailing Address

550 MADISON AVENUE
C/O UKIO OKAWA
NEW YORK NY 10022



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

2000

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/20/1970	
City & State		City & State		5. FEI Number	
Zip		Country		13-1914734	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
SVPS	NEES, KENNETH L	550 MADISON AVE	NEW YORK NY 10022
D	OHGA, N	550 MADISON AVE	NEW YORK NY 10022
D C	NOBUYUKI, IDEI	550 MADISON AVE	NEW YORK NY 10022
D	TAMOTSU, IBA	550 MADISON AVE	NEW YORK NY 10022
D	BURAK, PAUL H	575 MADISON AVE	NEW YORK NY 10022
EVPC	MARINUS N. HENNY Yang Hun Lee	550 MADISON AVE	NEW YORK NY 10022

LS

8. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name
CORPORATION SERVICE COMPANY
Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET
Suite, Apt. #, Etc.
300003451933--7
City
TALLAHASSEE
State
FL
Zip Code
32301

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

John J. Hoenigmann
JOHN J. HOENIGMANN
(REGISTERED AGENT MUST SIGN)

Date 11/2/00
AST VICE - PRESIDENT

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., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

John J. Hoenigmann
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/00 212833-6872
Date Daytime Phone #

CR2E040 (8/00)

2062



ACCOUNT NO. : 072100000032

REFERENCE : 886039 4377650

AUTHORIZATION : *Patricia Pizut*
COST LIMIT : \$ 758.75

ORDER DATE : November 2, 2000

ORDER TIME : 10:49 AM

ORDER NO. : 886039-005

CUSTOMER NO: 4377650

CUSTOMER: Michele Penaranda, Legal Asst
Sony Corporation Of America
550 Madison Avenue

New York, NY 10022

ANNUAL REPORT FILING

NAME: SONY CORPORATION OF AMERICA

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: JEANINE REYNOLDS

RECEIVED
DIVISION OF STATE
CORPORATIONS
NOV -3 PM 12:15
EXAMINER'S INITIALS: _____
1133
SUFFICIENCY OF FILING
TO ACHIEVE