## Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: CHARLES BACLET AND ASSOCIATES INC Account Name

Account Number : 120080000054 : (949)955-9585 Phone Fax Number

: (800)652-6504

## **REGISTERED AGENT CHANGE**

URES TELEVISION INTERNATIONAL ADVERTISING S

| Certificate of Status | 0       |
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| Certified Copy        | 0       |
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## **COVER LETTER**

| UBJECT: SONY PICTURES TEL               | (Name of Corporation)                             |                    |
|---|---|--------------------|
| OCUMENT NUMBER:                         | F98000005329                                      |                    |
| he enclosed Statement of Change of I    | Registered Office/Agent and fee are sub           | mitted for filing. |
| Please return all correspondence conce  | rning this matter to the following:               |                    |
|   | Sophy Keo   | DVIS<br>0          |
|   | (Name of Contact Person)                          |                    |
| CI                                      | harles Baclet and Associates, Inc. (Firm/Company) | 08 JUL -8 PI       |
|   | 2030 Main Street, Suite 1030<br>(Address)         | PH 3: 31           |
|   | (rvine, CA 92614                                  |                    |
| For further information concerning this | (City/State and Zip Code)                         |                    |

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327

Enclosed is a \$35.00 check made payable to the Department of State.

Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

9499559590

| I. The name of th                    | e corporation: SON  |   | TSION INTERNATIONAL ADV  | e of Florida.  ERTISING SALES COMPANY |  |  |
|--------------------------------------|---|---|--|---------------------------------------|--|--|
|                                      | the principal office address: 10202 W. Washington Blvd., Culver City, CA 90232  |   |  |                                       |  |  |
| 3. The mailing ad                    | dress (if different):   |   |  |                                       |  |  |
| 4. Date of incorpo                   | oration/qualification:  | 9/23/1998   | Document number:   | F98000005329                          |  |  |
| 5. The name and :<br>Florida Depart  |   | urrent registered age   | ent and registered office on fi  | le with the                           |  |  |
| _                                    | The P   | rentice-Hall Corpor   | ration System, Inc.  |                                       |  |  |
|                                      |   | 1201 Hayes St.,   | , Ste 105  |                                       |  |  |
|                                      |   | Tallahassee, FL 3   | 2301-2525  | <br>Q                                 |  |  |
| 6. The name and so (if changed):     | street address of the n   | ew registered agent   | (if changed) and /or registere   | ed office 08                          |  |  |
|                                      |   | NRAI Service  | es, Inc.   | _ 2                                   |  |  |
| _                                    | 2'  | 731 Executive Park  | Drive, Suite 4   |                                       |  |  |
| •                                    | (ቦ  | O Box NOT acceptable)   |  | ين                                    |  |  |
| -                                    |   | Weston, FL  | 33331  | <del></del>                           |  |  |
|                                      |   |   | ddress of the business office  |                                       |  |  |
| Such change was<br>authorized by the | authorized by resolution the corporation  | ution duly adopted<br>anon has been not   | by its board of directors or filed in writing of the chang   | by an officer so<br>e.                |  |  |
| (                                    | 34  | <u> </u>  | Corii D. Berg, Exec.V  | -P/Asst. Secretary                    |  |  |
| , -                                  | to an enter or attention  he appointment at re comply with the type  I am familiar with a  g filed merely to refi  been notified in writh | gistored agent and<br>visions of all status<br>nd agent the oblig<br>ect a change in the<br>ing of this change. | (Printed or typed nar<br>agree to act in this capacit<br>tes relative to the proper an<br>cation of my position as reg<br>registered office address, T | •                                     |  |  |
| JLD.                                 |   |   | 7/3/200  |                                       |  |  |
| 9                                    | ature of Registered Agent)  |   | · / (Date)   |                                       |  |  |
| If signing on beh                    | alf of an entity: B   | y: NRAI Services, In  | c  |                                       |  |  |
|                                      | ighes, Assistant Secr   | etary   |  |                                       |  |  |
| (1)                                  | ped or Printed Name)  |   |  |                                       |  |  |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)