## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # M96000000323 07 APR 26 AMII: 36 1. Entity Name SONY/ATV SONGS LLC SECRETARY OF STATE TALLAHASSEF, FLORIDA Principal Place of Business Mailing Address 550 MADISON AVENUE C/O SCA LEGAL 550 MADISON AVENUE, 27TH FLOOR NEW YORK, NY 10022 NEW YORK, NY 10022 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc 04102007 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 13-3861542 Not Applicable Zìo Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code FL 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 SIGNATURE Signature, typec or printed name of registered agent and title il applicable (NOTE: Registered Agent signature required when reinstaling) DATE Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM TITLE Delete TITLE Change Addition SONY/ATV MUSIC PUBLISHING LLC NAME NAME 550 MADISON AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10022 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME 000098696940 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE TITLE Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP upplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information courate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the rer or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the information indicated on this report is true and limited liability company or the rec Stiven A. Storch CFO of Sony IAIV SIGNATURE:

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	REFERENCE	:	868905 43	77650
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EXAMINER'S INITIALS: