

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V70247

FILED
Feb 03, 2012
Secretary of State

Entity Name: SONY LATIN AMERICA INC.

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE
400
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5201 BLUE LAGOON DRIVE
400
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0364558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: TORU, OKADA
Address: 5201 BLUE LAGOON DRIVE, STE 400
City-St-Zip: MIAMI, FL 33126

Title: SVPT
Name: GREEN, MARY J
Address: 5201 BLUE LAGOON DRIVE, STE 400
City-St-Zip: MIAMI, FL 33126

Title: EVPS
Name: WILLIAMS, MICHAEL T
Address: 5201 BLUE LAGOON DR. STE. 400
City-St-Zip: MIAMI, FL 33126

Title: SVAS
Name: HALBY, KAREN L
Address: 5201 BLUE LAGOON DR, STE 400
City-St-Zip: MIAMI, FL 33126

Title: VAS
Name: TIM, BOEHM
Address: 5201 BLUE LAGOON DRIVE, STE 400
City-St-Zip: MIAMI, FL 33126

Title: VAS
Name: FERNANDEZ, MARY C
Address: 5201 BLUE LAGOON DRIVE, STE 400
City-St-Zip: MIAMI, FL 33126

I hereby 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 all other like empowered.

SIGNATURE: TORU OKADA

P

02/03/2012

Electronic Signature of Signing Officer or Director

Date