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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000005777 (6)

1. Corporation Name
MCA/UNIVERSAL HOTEL, INC.

Principal Place of Business
100 UNIVERSAL CITY PLAZA
UNIVERSAL CITY CA 91608

Mailing Address
100 UNIVERSAL CITY PLAZA
UNIVERSAL CITY CA 91608-1002



3. Date Incorporated or Qualified 11/28/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 95-4552206	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 P.O. Box 5023 27 Suite, Apt. #, etc. 28 City & State 29 New York, N.Y. 30 Zip 31 10150 32 Country
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9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	100 UNIVERSAL CITY PLAZA	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	UNIVERSAL CITY CA 91608	2.1 TITLE	2.2 NAME
TITLE	NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
STREET ADDRESS	100 UNIVERSAL CITY PLAZA	3.1 TITLE	3.2 NAME
CITY - ST - ZIP	UNIVERSAL CITY CA 91608	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	100 UNIVERSAL CITY PLAZA	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
CITY - ST - ZIP	UNIVERSAL CITY CA 91608	5.1 TITLE	5.2 NAME
TITLE	NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
STREET ADDRESS	100 UNIVERSAL CITY PLAZA	6.1 TITLE	6.2 NAME
CITY - ST - ZIP	UNIVERSAL CITY CA 91608	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
TITLE	NAME		
STREET ADDRESS	100 UNIVERSAL CITY PLAZA		
CITY - ST - ZIP	UNIVERSAL CITY CA 91608		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Paul Buscemi Paul Buscemi

4/197 212572-7621

CR2E034 (9/96)