

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002087

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** HARD ROCK CAFE INTERNATIONAL (STP), INC.

**Current Principal Place of Business:**

6100 OLD PARK LN  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

6100 OLD PARK LN  
ORLANDO, FL 32835

**New Mailing Address:**

**FEI Number:** 13-3021248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** SVPD  
**Name:** WOLSZCZAK, JAY  
**Address:** 6100 OLD PARK LN  
**City-St-Zip:** ORLANDO, FL 32835

**Title:** AS  
**Name:** DONOVAN, RYAN  
**Address:** 6100 OLD PARK LANE  
**City-St-Zip:** ORLANDO, FL 32835

**Title:** AT  
**Name:** KNIPFING, CHRIS  
**Address:** 6100 OLD PARK LN  
**City-St-Zip:** ORLANDO, FL 32835

**Title:** DVPT  
**Name:** GISPANSKI, THOMAS  
**Address:** 6100 OLD PARK LN.  
**City-St-Zip:** ORLANDO, FL 32835

**Title:** P/D  
**Name:** DODDS, HAMISH  
**Address:** 6100 OLD PARK LANE  
**City-St-Zip:** ORLANDO, FL 32835

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:** JAY A WOLSZCZAK

SVPD

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date