
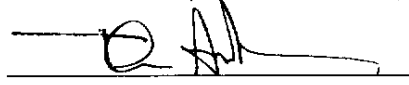


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

| | | | |
|--|----------------------------------|--|---------------------------------|
| LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 | |  FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | |
| FILING FEE \$ 188.75 | | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE | |
| 1. Name and Mailing Address of Limited Liability Company DOCUMENT # L94000000136 PLANET HOLLYWOOD (ISRAEL), L.C. 7380 SAND LAKE RD. SUITE 600 ORLANDO FL 32819 | | 1a. Principal Place of Business Address 7380 SAND LAKE RD. SUITE 600 ORLANDO FL 32819 | |
| 2. Principal Place of Business 8669 COMMODITY CIRCLE Suite, Apt. #, etc. | | 2a. Mailing Address 8669 COMMODITY CIRCLE Suite, Apt. #, etc. | |
| City & State ORLANDO, FL | | City & State ORLANDO, FL | |
| Zip 32819 | | Zip 32819 | |
| Country | | Country | |
| 3. Date Organized or Qualified 04/01/1994 | | 3a. State of Formation FL | |
| 4. FEI Number 59-3238343 | | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable | |
| 5. Date of Last Report 05/04/1998 | | 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/> | |
| 7. Name and Address of Current Registered Agent MARSHALL, BYRD F JR. GRAY, HARRIS & ROBINSON P.A. 201 E. PINE ST., SUITE 1200 ORLANDO FL 32801 | | 8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 600002874666 City FL ****188.75 ****188.75 | |
| 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. | | | |
| SIGNATURE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when term of office)</small> | | DATE _____ | |
| 10. Title | Managing Members/Managers | Business Street Address | City, State and Zip Code |
| MGR | EARL, ROBERT I | 7380 SAND LAKE RD., STE. 6 | ORLANDO FL |
| MEM | PLANET HOLLYWOOD INT, | 7380 SAND LAKE RD., SUITE | ORLANDO FL |
| MEM | PLANET HOLLYWOOD (TEL | 7380 SAND LAKE ROAD, SUITE | ORLANDO FL |
| | | 8669 COMMODITY CIRCLE | 32819 |
| AL APR 12 1999 | | | |
| 11. 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 is true and accurate 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address. | | | |
| SIGNATURE:  | | THOMAS AVALONE 4/20/99 407-345-5300 | |
| <small>SIGNATURE AND VERIFICATION OF NAME OF SIGNER'S MANAGING MEMBER REQUIRED</small> | | | |