

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

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 # P39769 (5)
 1. Corporation Name
UNIVERSAL CITY PROPERTY MANAGEMENT COMPANY II



Principal Place of Business: **100 UNIVERSAL CITY PLAZA UNIVERSAL CITY CA 91808**
 Mailing Address: **100 UNIVERSAL CITY PLAZA UNIVERSAL CITY CA 91608-1002**

3. Date Incorporated or Qualified: **07/24/1992** 3a. Date of Last Report: **05/01/1996**
 4. FEI Number: **95-4380300** Applied For: Not Applicable:
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **100 UNIVERSAL CITY PLAZA UNIVERSAL CITY CA 91808**
 2a. Mailing Address: **P.O. Box 5023**
 21. Suite, Apt. #, etc.:
 22. City & State: **New York, N.Y.**
 23. Zip: **10150** Country:
 24. 25. 29. 30.

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
 81. Name
 82. Street Address (P.O. Box Number is Not Acceptable)
 83.
 84. City: **FL** 85. Zip Code

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's signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> DELETE
NAME	BENSION, RONALD
STREET ADDRESS	100 UNIVERSAL CITY PLAZA
CITY-ST-ZIP	UNIVERSAL CITY CA 91808
TITLE	SD <input type="checkbox"/> DELETE
NAME	SAMUEL, MICHAEL
STREET ADDRESS	100 UNIVERSAL CITY PLAZA
CITY-ST-ZIP	UNIVERSAL CITY CA
TITLE	SVD <input type="checkbox"/> DELETE
NAME	RANDALL, KAREN
STREET ADDRESS	100 UNIVERSAL CITY PLAZA
CITY-ST-ZIP	UNIVERSAL CITY CA
TITLE	EV <input type="checkbox"/> DELETE
NAME	WEITZMAN, HOWARD L.
STREET ADDRESS	100 UNIVERSAL CITY PLAZA
CITY-ST-ZIP	UNIVERSAL CITY CA
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	SMITH, GEORGE
STREET ADDRESS	100 UNIVERSAL CITY PLAZA
CITY-ST-ZIP	UNIVERSAL CITY CA
TITLE	T <input type="checkbox"/> DELETE
NAME	CHERNEY, PAMELA F
STREET ADDRESS	100 UNIVERSAL CITY PLAZA
CITY-ST-ZIP	UNIVERSAL CITY CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Paul Buscemi
5.3 STREET ADDRESS	800 Third Avenue
5.4 CITY-ST-ZIP	New York, New York 10022
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 411 107 212-572-7121

CR2E034 (9/96)