

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000079863 (5)

1. Corporation Name

PLANET HOLLYWOOD (NEW ORLEANS), INC.



Principal Place of Business

Mailing Address

7380 SAND LAKE RD.
SUITE 600
ORLANDO FL 32819

7380 SAND LAKE RD.
SUITE 600
ORLANDO FL 32819

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 8669 Commodity Circle		26 8669 Commodity Circle		11/18/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3214479	
City & State		City & State		Applied For	
23 Orlando, Florida		28 Orlando, Florida		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 32819		29 32819		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 USA		30 USA		Trust Fund Contribution	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARSHALL, BYRD F JR.
201 EAST PINE ST.
SUITE 1200
ORLANDO FL 32801

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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	D/P
NAME	EARL, ROBERT I	1.2 NAME	EARL, ROBERT I
STREET ADDRESS	7380 SAND LAKE RD., SUITE 650	1.3 STREET ADDRESS	8669 COMMODITY CIRCLE
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32819
TITLE	VIP	2.1 TITLE	D/V/T
NAME	AVALLONE THOMAS	2.2 NAME	AVALLONE, THOMAS
STREET ADDRESS	7380 SAND LAKE RD, STE 650	2.3 STREET ADDRESS	8669 COMMODITY CIRCLE
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32819
TITLE	VSD	3.1 TITLE	D/SFV/S
NAME	JOHNSON, SCOTT E.	3.2 NAME	JOHNSON, SCOTT E.
STREET ADDRESS	7380 SAND LAKE ROAD #650	3.3 STREET ADDRESS	8669 COMMODITY CIRCLE
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32819
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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:

THOMAS
AVALLONE

4/29/98

(407) 345-5300

CP2E034 (10/97)