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

PROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000079881 (7)

PLANET HOLLYWOOD (REGION VII), INC.

FILED
May 12 1997 8:00am
Secretary of State

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Principal Plac 7360 SAND LA SUITE 600 ORLANDO FL : US	ke rd.	Mailing Address 7380 SAND LAKE RD. SUITE 800 ORLANDO FL 32819-5259 US		3. Date Incorporated or Qualified 3a. Date of Last Report			
•		••			11/18/1993	04/12/1996	
2. Principal P 21	Place of Business	2a. Mailing Address			4. FEI Number 59-32 14476	<del></del>	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b>	Additional
22		27				Fee I	Required
City & Stat 23	e	City & State			Election Campaign Financing     Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip	Country	······································	This corporation has liability for	intangible tax under	
24	25	29	30		Florida Statutes  10. Name and Address of New B	Yes No	
1445	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New IN	agistered Agent	
201	RSHALL, BYRD F JR. E. Pine St. Te 1200		82	,	Address (P.O. Box Number is Not Accepta	ble)	
	ANDO FL 32801		83				
			84	City		FL 85 Zip	p Code
44 D	h. M	Land 607 1609 Elevida Ctatu	ton the about	o pamod	corporation submits this statement for the		ite registered
agent. La SIGNATURE	am familiar with, and accept the obligation of the state	tions of, Section 607.0505, Fl	lorida Statute	S.	poration's board of directors. I hereby acce	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		
INTLE	PD	☐ DELETE	1.1 TITLE			Change	e 🛄 Addition
NAME	EARL, ROBERT I	^	1.2 NAME				
STREET ADDRESS	7380 SAND LAKE RD., STE. 65 ORLANDO FL	v		ADDRESS	Orlando, FL 32819		
CITY-ST-7IP TITLE	DC	<b>₩</b> DELETE	1.4 City-5 2.1 Title	51-212	UT141700, 11 3281-1	Change	e 🔲 Addition
NAME	BARISH, KEITH	7	2 2 NAME				
STREE* ADDRESS	140 W 57TH ST., 13TH FLOOR		2.3 STREE	T ADDRESS			
CHY-ST-ZIP	NEW YORK NY		2.4 CITY-	ST-ZIP			
TITLE	TCEA	☐ DELETE	3.1 TITLE		VITID	Change	e 🔲 Additio
NAME	AVALLONE, THOMAS		3.2 NAME				
STREET ADORESS	₹ 7380 SAND LAKE ROAD, #650 ORLANDO FL		3.3 STREE	T ADDRESS	orlando, FL 32819		
City - 51 - 21F THEE	SVP	DELETE	4.1 TITLE	31-ZIF		<b>∑</b> Change	e Additio
NAME	JOHNSON, SCOTT E		4. 2 NAME		VISID	•	
STREET ADDRESS	7380 SAND LAKE ROAD, #650	1	4.3 STREE	T ADDRESS	_		
CRY-ST-7iP	ORLANDO FL		4.4 CITY -	ST-ZIP	Orlando, FL 32819		——————————————————————————————————————
TiTLE		☐ DELETE	5.1 TITLE		•	Change	e []] Addition
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY - ST - Z:P		DELETE	54 C(TY-) 61 TITLE	ST-ZIP		Chango	e Addition
THRE		L. DELLIE	62 NAME			tund College	- hand rice (100)
NAME STREET ADDRESS				T ADDRESS			
STREET ADDRESS			6.4 CITY-				
14 Ldo here	<ul> <li>i</li> <li>bby cerlify that the information supplied</li> </ul>	with this filing does not qua	lify for the ex-	emption s	tated in Section 119.07(3)(i), Florida Statul	es. I further certify th	at the
informati Lam an d	on indicated on this annual report or si	upplemental annual report is the receiver or trustee empo	true and acc wered to exe	urate and	that my signature shall have the same leceport as required by Chapter 607, Florida	gai errect as ir made t	under oatn; tr