

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P94000073730 (1)**

1. Corporation Name

**PLANET HOLLYWOOD (SEATTLE), INC.  
PLANET HOLLYWOOD (LONDON), 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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/07/1994

3a. Date of Last Report

03/27/1995

4. FEI Number 59-3285750

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$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 ☐

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 title (if applicable)

NOTE: Registered Agent's signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME EARL, ROBERT I  
STREET ADDRESS 7380 SAND LAKE RD., STE. 650  
CITY-STATE-ZIP ORLANDO FL

DELETE

TITLE DC  
NAME BARISH, KEITH  
STREET ADDRESS 140 WEST 57TH ST., 13TH FLOOR  
CITY-STATE-ZIP NEW YORK NY

DELETE

TITLE TCEA  
NAME AVALLONE, THOMAS  
STREET ADDRESS 7380 SAND LAKE ROAD, #650  
CITY-STATE-ZIP ORLANDO FL

DELETE

TITLE SVP  
NAME JOHNSON, SCOTT E  
STREET ADDRESS 7380 SAND LAKE ROAD, #650  
CITY-STATE-ZIP ORLANDO FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

300001778753

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\*\*\*208.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Scott E. Johnson,  
Secretary

01/31/96

407-345-5300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

94-12-96