FILE NOW: FILING FEE AFTER MAY 1 IS $225.00 3-27-95 S-6-2634

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10: 32

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000090886 (0)

1. Corporation Name

PLANET HOLLYWOOD TRANSPORTATION, INC.

Principal Place of Business	Mailing Address
7380 SAND LAKE RD. SUITE 650 ORLANDO FL 32819	7380 SAND LAKE RD. SUITE 650 ORLANDO FL 32819

3. Date Incorporated or Qualified: 12/15/1994
3a. Date of Last Report:

2. Principal Place of Business (21)		2a. Mailing Address (26)	
Suite, Apt. #, etc. (22) Suite 600		Suite, Apt. #, etc. (27) Suite 600	
City & State (23)		City & State (28)	
Zip (24)	Country (25)	Zip (29)	Country (30)

4. FEI Number — [X] Applied For [ ] Not Applicable
5. Certificate of Status Desired [X] — $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 [X] Yes [ ] No

9. 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 ______________________ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	D/P/CEO [X] Change [ ] Addition
NAME	EARL, ROBERT I	12 NAME	
STREET ADDRESS	7380 SAND LAKE RD., STE. 650	13 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32819	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	D/C [X] Change [ ] Addition
NAME	BARISH, KEITH	22 NAME	
STREET ADDRESS	140 W. 57TH ST., 13TH FLOOR	23 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	24 CITY-ST-ZIP	
TITLE		31 TITLE	T/CFO/EVP/AS [ ] Change [X] Addition
NAME		32 NAME	Avallone, Thomas
STREET ADDRESS		33 STREET ADDRESS	7380 Sand Lake Road, #650
CITY-ST-ZIP		34 CITY-ST-ZIP	Orlando, FL 32819
TITLE		41 TITLE	S/VP [ ] Change [X] Addition
NAME		42 NAME	Johnson, Scott E.
STREET ADDRESS		43 STREET ADDRESS	7380 Sand Lake Road, #650
CITY-ST-ZIP		44 CITY-ST-ZIP	Orlando, FL 32819
TITLE		51 TITLE	[ ] Change [ ] Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	[ ] Change [ ] Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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(1)(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: [signature] Scott E. Johnson, Secretary 1/27/95 407-345-5300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

0062032 CP