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

CHESTANGER II

Mailing Address

PROFIT CORPORATION **ANNUAL REPORT**

1997

Principal Place of Business

7380 SAND LAKE RD.



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000090886 (0)

PLANET HOLLYWOOD TRANSPORTATION, INC.

7380 BAND LAKE RD. SUITE 800 ORLANDO FL 32819 US			6	7380 SAND LAKE RD. SUITE 800 ORLANDO FL 32819-5259 US				_		orated or Qualified		of Last R	Roport
									12/15/199		04/12	2/1996	
<u> </u>	Place of Busin	ooss		2a. Mailing Address				4. FEI Number			Ar	oplied For	
21			26						<u>59-3286</u>	949			ot Applicable
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5. Certificate o	of Status Desired			Additional equired	
City & State				City & State					6. Election Car	mpaign Financing		\$5.00	May Be
23				28				Trust Fund (Contribution			to Fees	
Zíp	Country			Zip Cou				8. This corporation has liability for intangible tax under s.			. 199.032,		
24		and Address of (29		30	1			Florida Stati		Yes 💢		
			Surrent Reg	istered Agent		81	Name		10. Name and	Address of New Re	gistered Aç	jent	
	RSHALL, BY			0,	Name								
201 EAST PINE ST.						82	Street	Addres	s (P.O. Box Num	nber is Not Acceptab	le)		
SUITE 1200						83							
OR	LANDO FL (32801				03							
						84	City				FL	85 Zip (Code
11. Pursuan	t to the provis	lons of Sections 60	07.0502 and	607,1508, Florida Statul	les, the a	bove	e-named	Corpora	ation submits thi	s statement for the n		hangino it	s registered
office or agent. I	registered ag am familiar wi	ent, or both, in the th, and accept the	State of Flo obligations	607.1508, Florida Statul rida. Such change was of, Section 607.0505, Fl	authorize orida Sta	d by lutes	the cor	poration	n's board of direc	ctors. I hereby accer	of the appoin	ntment as	registered
SIGNATURE		or printed name of regist	ered agent and bi	le it applicable (NOI	IC: Registere	d Ann	nt signature	e required a	when reinstating)		DATE		
12.			RS AND DIRE		13.		, eg mor			CHANGES TO OFFICE		DIRECTOR	RS IN 12
TITLE	DPCE			☐ DELETIE	1.1 T	TLE		DIF	>		2	Change	Addition
NAME	EARL, RO	DBERT I			1.2 N	AME		' ''					
STREET ADDRESS	7380 SAI	ND LAKE RD., S	TE. 650		13 S	TREET	ADDRESS						
CITY-ST-ZIP	ORLAND) FL			140	IIY S	T-ZIP	1 Ark	ando, FL	22819			
TITLE	C			⊠ DELETE	211				A14051-1-5	<i>,,</i>		Change	☐ Addit/on
NAME	BARISH,	Keith			22 N	AME							
STREET ADDRESS					2 3 STREET		ADDRESS						
CITY-ST-ZIP	NEW YOU	rk ny			2.40	ЛY-S	1- 7 IP						
TITLE	TOEA			DELETE	317	1LF		VT	D		Σ	Change	Addition
NAME	AVALLON	E, THOMAS			32 N	AME:		,					
STREET ADDRESS	7380 SAI	YD LAKE ROAD,	#650		3.3 S	TREET	ADDRESS						
CITY-ST-ZIP	ORLAND) FL			3.4. 0	IIY-S	1- ZIP	orla	indo, FL	32819			
TITLE	SVP	_		DELETE	4.1 1	TLE		V 5	D		2	Change	☐ Addition
NAME		N, SCOTT E			4. 2 N	AME							
STREET ADDRESS		ND LAKE ROAD,	#6 50		4.3 S	TREE I	ADORESS						
CITY-ST-ZIP	ORLAND	D FL			4.4 C	1Y - \$1	1 - 7IP	Orla	indo, FL.	32819			
TITLE				. DELETE	5.1 Ti	1LE						Change	Addition
NAME					5.2 N	AME							
STREET ADDRESS	1				5.3 S	TREET.	ADDRESS						ĺ
CITY-ST-ZIP			·		5.4 C	TY-S	I - 7IP						
TITLE				LJ DELETE	6.1 TI	1LE						Change	Addition
NAME					62 N	4ME							
STREET ADDRESS					638	IREET	ADDRESS						
CITY-ST-ZIP	Shu partit di	Aba infarmati	and the state of the	a Constant		TY-ST		<u></u>					
14. I do hereby certify that the information supplied with this filing does not quality 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.													dor oath: that