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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

**DOCUMENT #** 

P95000051154 (9)

PLANET HOLLYWOOD (TEL AVIV), INC.

| Principal Place of Business |  |
|-----------------------------|--|

Mailing Address

7380 SAND LAKE ROAD

7380 SAND LAKE ROAD

DELCTE

DELFTE

DELETE



|  |  |               | SUITE 600<br>ORLANDO FL 32819 |                               |        |                           | Date Incorporated or Qualified     06/30/1995  | 3a. Dat                   | e of Last Report                                       |  |  |
|--|--|---------------|-------------------------------|-------------------------------|--------|---------------------------|--|---------------------------|--|--|--|
| 2. Principal P                                     | cipal Place of Business 2a. Mailing Address  |               |                               |                               |        |                           | 4. FEI Number  | <b></b>                   | Applied For  |  |  |
| 21   | 26   |               |                               |                               |        |                           | 59-3327841   |                           | Not Applicable   |  |  |
| Suite, Apt.  | e, Apt. #, etc. Suite, Apt. #, etc. 27   |               |                               |                               |        |                           | 5. Certificate of Status Desired   | ×                         | \$8.75 Additional<br>Fee Required                      |  |  |
| 23   | City & State         City & State           3         28   |               |                               |                               |        |                           | Election Campaign Financing     Trust Fund Contribution  |                           | \$5.00 May Be<br>Added to Fees                         |  |  |
| Zip<br><b>24</b>                                   | Zip Country<br>24 25 29  |               |                               | Zip Country                   |        |                           | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes XX Yes □ No |                           |  |  |  |
|  | 9. Name and Address of Curre   | nt Regis      | ered Agent                    | -11                           |        |                           | 10. Name and Address of New R  |                           | Agent  |  |  |
|  |  |               |                               |                               | 81     | Name                      |  |                           |  |  |  |
| MARSHALL, BYRD F JR. 201 E. PINE STREET SUITE 1200 |  |               |                               |                               | 82     | Street A                  | Address (P.O. Box Number is Not Acceptable)  |                           |  |  |  |
|  |  |               |                               |                               | 83     |                           |  |                           |  |  |  |
| ORLANDO FL 32801                                   |  |               |                               |                               | 84     | City                      | FL 85 Zip Code   |                           |  |  |  |
| or register  | to the provisions of Sections 607.050<br>red agent, or both, in the State of Flo-<br>ith, and accept the obligations of, Sec | ada Such      | change was authorize          | es, the above<br>ad by the co | orpe   | named corp<br>oration's b | poration submits this statement for the pur<br>pard of directors. I hereby accept the appo         | pose of cha<br>intment as | anging its registered office<br>registered agent. I am |  |  |
| SIGNATURE  | Signature, typed or printed name of registered age-  | channith if a | pg#.absc 750                  | T. Registered i               | Agrail | t signat mene p           | ana) when relastating  | DATE                      |  |  |  |
| 12.  | OFFICERS AND DIRECTORS   |               |                               | 13.                           |        | *****                     | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |                           |  |  |  |
| TITLE  | D  |               | □ DELETE                      | 1:11                          | LE     |                           |  | ]                         | Change Addition  |  |  |
| NAME   | EARL, ROBERT I   |               |                               | 1.2 NA                        | ME     | ĺ                         |  |                           |  |  |  |
| STREET ADDRESS                                     | SS 7380 SAND LAKE ROAD, SUITE 600  |               |                               | 13 STF                        | REET   | ADDRESS                   |  |                           |  |  |  |
| CITY-ST-ZIP  | ORLANDO FL 32819   |               |                               | 1.4 C-T                       | Y-51   | T - ZIP                   |  |                           |  |  |  |
| TITLE  | D  | ☐ DELETE 2.17 |                               |                               | LF     |                           |  | [                         | Change Add-tion  |  |  |
| NAME   | BARISH, KEITH  |               |                               | 2.2 NA                        | MS     | }                         |  |                           |  |  |  |
| STREET ADDRESS                                     | 7380 SAND LAKE ROAD, S   | SUITE 60      | 0                             | 23 STF                        | REET   | ADDRESS                   |  |                           |  |  |  |
| CITY-ST-ZIP  | ORLANDO FL 32819   |               |                               | 2.4 CIT                       | y - S1 | I - 216                   |  |                           |  |  |  |
| TITLE  |  |               | DELETE                        | 3 1 [1]                       | LE     | -                         | T/CFO/EVP/AS   | (                         | Change  Addition                                       |  |  |
| NAME   |  |               |                               | 3 2 NAM                       | Mξ     |                           | Avallone, Thomas   |                           |  |  |  |
| STREET ADDRESS                                     |  |               |                               | 33 \$11                       | HEE!   |                           | 7380 Sand Lake Roa   | a. #6                     | 50   |  |  |
| C(TY - ST - 7(P                                    | 1  |               |                               | 3.4.017                       | v . C1 | T. 21D                    | Orlando, FL 32819  | ~,                        |  |  |  |

CITY-ST-7IP 6 4 CITY - ST-ZIP 14. Ido 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 directled of an proprioration for the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Right 12 or Right 15 it of propriorations. appears in Block 12 or Block )

4 1 TITLE

4.2 NAME

5 1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADORESS

5 4 CITY - ST - ZIP

4.4 C!TY - ST - Z-P

S/VP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-SI-ZiP

CITY-ST-ZIP

Scott E. Johnson, Secretary ...

01/3//96

Johnson, Scott E. 7380 Sand Lake Road, #650

100001778751

-04/12/96--01078--0<del>9</del>5<sup>change</sup>

Orlando, FL 32819

\*\*\*208.75

Change

Change

**X** Addition

☐ Addition

☐ Addition