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

**CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P97000034382 (6)

PLANET HOLLYWOOD (THEATRES), INC.

Mailing Address

Principal Place of Business

## **FILED** May 15 1998 8:00am Secretary of State



| SUITE 600<br>ORLANDO FL 32819             |   | 7380 SAND LAKE ROAD<br>SUITE 600<br>ORLANDO FL 32819   |  | DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  04/16/1997 |  |                                |                                       |        |
|---|---|--|--|---|--|--------------------------------|---------------------------------------|--------|
| 2. Principal P                            | pal Piace of Business 2a. Mailing Address   |  |  |   | 4. FEI Number  |                                | onlind for                            | 4      |
| 21  | 8669 Commodity Circle   |  |  |   | 59-3441458   | ———·                           | pplied For                            | -      |
| Suite, Apt                                | e, Apt #, etc. Suite, Apt #, etc  |  |  | icie  | 33 3441430   |                                | ot Applicable                         | +      |
| 22 27                                     |   |  |  |   | 5. Certificate of Status Desired   | 7                              | Additional equired                    |        |
| 23  | Orlando, Florida  | 28   |  |   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees                     |                                |                                       |        |
| Zip                                       | Country   | Zip  | Country  |   | 8. This corporation owes or has paid the o   |                                | tangible                              | 7      |
| 24  | 32819 <sub>25</sub> USA   | 29 32819   | ₃USA   |   | Personal Property Tax due June 30. 🔀 Yes 🔲 No  |                                |                                       |        |
|   | 9. Name and Address of Current  | Registered Agent   | T  | 10. Name and Address of New Registered Agent                              |  |                                |                                       |        |
|   | EUKAMM, MICHAEL E   |  | 81   | Name  |  |                                |                                       |        |
| 20  | 1 E PINE STREET   |  | 82   | Street A  | ddress (P.O. Box Number is Not Acceptable)   | <del></del>                    | · · · · · · · · · · · · · · · · · · · | ┨      |
| Si  | NTE 1200  |  |  |   |  |                                |                                       |        |
| 01  | RLANDO FL 32801   |  | 83   |   |  |                                |                                       | 1      |
|   |   |  | 84   | City  |  | as Zin                         | Code                                  | 4      |
|   | _   |  |  | ,   | F  |                                |                                       |        |
| 11. Pursuant<br>office or r<br>agent. I a | to the provisions of Sections 607.0502<br>egistered agent, or both, in the Stale c<br>m familiar with, and accept the obligat | and 607,1508, Florida Statute<br>of Florida. Such change was a<br>ions of, Section 607,0505, Flo | es, the abov<br>authorized by<br>orida Statute | e-named o<br>y the corpo<br>s.  | corporation submits this statement for the purpose oration's board of directors. I hereby accept the a | of changing i<br>ppointment as | ts registered<br>registered           |        |
| SIGNATURE                                 | Signature, typicd or printed fractic of registered nation   |  |  |   | equired when reinslating) DATE   |                                |                                       |        |
| 12.                                       | OFFICERS AND  | DIRECTORS  | 13.  |   | ADDITIONS/CHANGES TO OFFICERS A  | ND DIRECTOR                    | RS IN 12                              | 16     |
| TITLE                                     | Ď   | DELETE   | 1.1 TITLE                                      |   | D/P  | X Change                       | Addition                              | 15     |
| NAME                                      |   |  |  |   | EARL, ROBERT I.  |                                |                                       | 3      |
| STREET ADDRESS                            |   |  |  | ADDRESS   | 8669 COMMODITY CIRCLE  |                                |                                       | ۱ξ     |
| CITY-ST-ZIP                               | ORLANDO FL 32819  |  | 1.4 CITY-5                                     | 5T - ZIP  | ORLANDO, FLORIDA 32819   |                                |                                       | ន្ត្រី |
| TITLE                                     | D   | DELETE   | 2.1 TITLE                                      |   | D/V/T  | <b>K</b> Change                | Addition                              | 7[     |
| NAME                                      | Johnson, Scott e  |  | 2.2 NAME                                       |   | AVALLONE, THOMAS   |                                |                                       |        |
| STREET ADDRESS                            | 7380 SAND LAKE RD, STE 60   | 0  | 23 STREET                                      | ADDRESS   | 8669 COMMODITY CIRCLE  |                                |                                       |        |
| CITY-ST-ZIP                               | ORLANDO FL 32819  |  | 2. 4 City-                                     | ST - ZIP  | ORLANDO, FLORIDA 32819   | .**                            |                                       | 1      |
| TITLE                                     | D   | DELETE   | 3.1 TITLE                                      |   | D/SrV/S  | X Change                       | Addition                              | 1      |
| NAME                                      | AVALLONE, THOMAS  |  | 3.2 NAME                                       |   | JOHNSON, SCOTT E.  |                                |                                       |        |
| STREET ADDRESS                            | 7380 SAND LAKE RD, STE 60   | 0  | 3.3 STREET                                     | ADDRESS   | 8669 COMMODITY CIRCLE  |                                |                                       |        |
| CITY-ST-ZIP                               | ORLANDO FL 32819  |  | 3.4. CITY-                                     | ST-ZIP  | ORLANDO, FLORIDA 32819   |                                |                                       | -      |
| TITLE                                     |   | DELETE   | 4.1 TITLE                                      |   | , , , , , , , , , , , , , , , , , , ,  | Change                         | Addition                              | 1      |
| NAME                                      |   |  | 4. 2 NAME                                      | -   |  |                                |                                       | Ì      |
| STREET ADDRESS                            |   |  | 4.3 STREET                                     | ADDRESS   |  |                                |                                       |        |
| CITY-ST-ZIP                               |   |  | 4.4 CITY-S                                     | 1-ZIP   |  |                                |                                       |        |
| TITLE                                     |   | ☐ OELETE   | 5.1 TITLE                                      |   |  | ☐ Change                       | Addition                              | 1      |
| NAME                                      |   |  | 5.2 NAME                                       |   |  |                                |                                       |        |
| STREET ADDRESS                            |   |  | 5 3 STREET                                     | ADDRESS   |  |                                |                                       |        |
| CITY-ST-ZIP                               |   |  | 54 CITY-S                                      | i i   |  |                                |                                       |        |
| TITLE                                     |   | ☐ DELETE   | 6.1 TITLE                                      |   |  | ☐ Change                       | Addition                              | 1      |
| NAME                                      |   |  | 6.2 NAME                                       |   |  | ·                              |                                       |        |
| STREET ADDRESS                            |   |  | 6.3 STREET                                     | ADDRESS   |  |                                |                                       |        |
| CITY-ST-ZIP                               |   |  | 6.4 CITY-S                                     |   |  |                                |                                       | 1      |
| ##   hereby o                             | ortifications the inference in a making with  | All of the second second   | - V. 1 V. 1 1 U                                | <u>"</u>  |  |                                |                                       | 1      |

I hereby certify that the information supplied with this filing does not qualify 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 justice 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 a after three or the receiver of the corporation of the corporation

THOMAS

11/20/20