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

**FILED** PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Jun 16 1998 8:00 am \* ANNUAL REPORT Secretary of State Secretary of State 1**9**98 DIVISION OF CORPORATIONS DOCUMENT # P97000089251 (7) UNIVERSAL CITY RESORT & SPA, INC. Principal Place of Business Mailing Address 6649 WESTWOOD BOULEVARD #130 6649 WESTWOOD BOULEVARD #130 ORLANDO FL 32821 ORLANDO FL 32821 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/16/1997 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apl. #, elc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Ζiρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** вз 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (No.11 Registered Agent squature required when rous along) type it or protect trace of registered as jets and for at applicable 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 UDE KESSLER, RICHARD C 1.2 NAME NAME 6649 WESTWOOD BOULEVARD #130 1.3 STREET ADORESS STREET ADDRESS ORLANDO FL 32821 1.4 CHY-\$1-ZIP CITY-ST-ZIP Change Addition T DELETE 21 III.E TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Addition . Change 3.1 TH( F TITLE NAME 32 NAMI 3.3 STHEET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CHTY-ST-ZIF DELETE Change Addition TiTLE 4.1 July E 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-7IP DETETÉ 51 THE Change Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 5.4 CITY - \$1 - ZIP DELETE Addition TITLE 6 1 111LE

6.2 NAME

14. Thereby certify that the information supplied with this tring does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 of the Techwer or trusted 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 on an infaction with an address.

6.3 STREET ACCRESS

-06/03/98---01010---039

\*\*\*BBD.00

NAME

STREET ADDRESS

CITY-ST-ZIP