FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998

NTERNATIONAL DINING, LTD.

empowered to execute this report as required by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A29996**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 22 AM 10: 26

47.31



Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
8501 W. ROLLING HILLS CIRCLE	3501 W. ROLLING HILLS CIRCLE	04/27/1990	\$250,000.00
DAVIE FL 33328	DAVIE FL 33328	3a. Date of Lest Report	ΨΕΟΟ,000:00
		11/22/1996	5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address	28. Principal Office Address	4. Stale or Country of Formation	
Suite, Apt. #, etc.		FL.	\$7,500.00
ouite, Apr. #, etc.	Suite, Apt. #, etc.	6. FEI Number	Applied For
City & State	City & State	65-0186028	Not Applicable
Zip Country	Z _i p Cou	7. Certificate of Status Desired	\$8.75 Additional Fee Required
		8. Make check payable to: Dept. of	State (See reverse side for fee informat
9. Name and Address of Cu	rrent Registered Agent	10. If changed, new Registers	ed Agent/Office
ROTH, JOEL L PA 301 YAMATO RD, SUITE 1200		Name	
		Street Address (P.O. Box Number Is Not Acceptable)	
NORTHERN TRUST PLAZA	Si	uite, Apt. #, etc.	
BOCA RATON FL 33431		City Zip Code	
10a. Pursuent to the provisions of sections 620.105 for the purpose of checoling its registered of the	1 and 620.192, Florida Statutes, the above-named limits of cregistrand agent, or both in the State of Florida.	ited partnership organized or registered under the laws of the Such change was authorized by its general partner(s). I hon	ne State of Florida, submils this stateme
agent. I am familiar with, and accept the oblig	alions of section 620.192, Florida Statutes.	oven vitalige was authorized by its general partiter(s). I hope	coy accept the appointment of registere
SIGNATURE (Registered Agent Accepting Appointmen	0	DA1E	
A GENERAL PARTNER THA	AT IS A CORPORATION, LIM JST BE REGISTERED AND A	ITED PARTNERSHIP OR OTHE	
Name(s) of General Partner(s)	Address of Each General Park (Do NO1 Use Post Office Box Nur		11c. Registration/ Document Number
INTERNATIONAL DINING,INC	3501 W ROLLING HILLS	DAVIE FL	L66961
	SSST TO TO ELEMAN THE ES	DAVICTE	100901
			393180 1 78801102005
		*****	7.05-01.102005 56.25 ****156.25
		1	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		n amendment must be filed to cha	
 1 do hereby certify that the information supplied w Corporations from any liability of non-compliance 	rith this filing is voluntarily furnished and does not qual with Section 119.07(3)(k) in the event that the informal	ify for the exemption stated in Section 119.07(3)(k), Florida tion supplied is deemed exempt from public eccess. I furth	Statutes. I release the Division of er certify that the information indicated:

this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

Daytime Telephone Number

NOBUAKI KASAI