2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006650

Name:

Address:

City-St-Zip:

DUDYO DECTALIDANT ODGUDUNG

FILED Apr 13, 2009 Secretary of State

Entity Na	me: RUDYSI	RESTAURANT GROUP, INC	<i>ن</i> .				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	53RD TERRAG	DE .					
SUITE 201 MIAMI, FL							
Current Mailing Address:			New Maili	New Mailing Address:			
	53RD TERRAG	DE .					
SUITE 201 MIAMI, FL							
FEI Number	: 88-0210808	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desir	red ()	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:		
BENIHANA 8685 NW : MIAMI, FL	53RD TERRAG	CE					
	named entity : e of Florida.	submits this statement for th	e purpose of changing i	ts registered	office or registered agent	, or both,	
SIGNATUI	RE:						
	Electror	ic Signature of Registered A	Agent		Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ().					
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CD () SCHWARTZ, Ju 8685 NW 53RD MIAMI, FL		Title: Name: Address: City-St-Zip:				
Title: Name: Address: City-St-Zip:	VPD () YOSHIMOTO, 1 8685 NW 53RE MIAMI, FL		Title: Name: Address: City-St-Zip:	VP (YOSHIMOTO, 8685 NW 53F MIAMI, FL 33	RD TERRACE		
Title: Name: Address: City-St-Zip:	PD () GARCIA, JUAN 8685 NW 53RD MIAMI, FL		Title: Name: Address: City-St-Zip:	PD (GARCIA, JUA 8685 NW 53F MIAMI, FL 33	RD TERRACE		
Title:	()	Delete	Title:	CFOD () Change (X) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above or an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

ORTEGA, JOSÉ I CFOD

MIAMI, FL 33166

8685 NW 53RD TERRACE

SIGNATURE: JUAN C. GARCIA **PRES** 04/13/2009