

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P05325 (6)

1. Corporation Name

BENIHANA OF TOKYO, INC.



Principal Place of Business

8685 NW 53RD TERRACE  
MIAMI FL 33166

Mailing Address

8685 NW 53RD TERRACE  
MIAMI FL 33166

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/15/1985

3a. Date of Last Report

04/28/1995

4. FEI Number

13-1998703

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME AOKI, ROCKY  
STREET ADDRESS 8685 NW 53RD TERRACE  
CITY-STATE-ZIP MIAMI FL

1.1 TITLE CHAIRMAN OF THE BOARD ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

TITLE V ☐ DELETE  
NAME KATA, MICHAEL W.  
STREET ADDRESS 8685 NW 53RD TERRACE  
CITY-STATE-ZIP MIAMI FL

2.1 TITLE PRESIDENT ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

TITLE V ☐ DELETE  
NAME YOSHIMOTO, TAKANORI  
STREET ADDRESS 8685 NW 53RD TERRACE  
CITY-STATE-ZIP MIAMI FL

3.1 TITLE DIRECTOR ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

TITLE ST ☒ DELETE  
NAME JUAN C. GRACI  
STREET ADDRESS 8685 NW 53RD TERRACE  
CITY-STATE-ZIP MIAMI FL

4.1 TITLE VP ☐ Change ☒ Addition  
4.2 NAME RAYMOND C. CLAIR  
4.3 STREET ADDRESS 8685 N.W. 53RD TERRACE  
4.4 CITY-STATE-ZIP MIAMI FL 33166

TITLE D ☐ DELETE  
NAME AOKI, KATSU  
STREET ADDRESS 8685 NW 53RD TERRACE  
CITY-STATE-ZIP MIAMI FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

TITLE D ☐ DELETE  
NAME DORNBUSH, DARWIN C.  
STREET ADDRESS 8685 NW 53RD TERRACE  
CITY-STATE-ZIP MIAMI FL

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

14. I do 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 director of this corporation or the receiver or trustee 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)