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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000065155 (2) DOCUMENT

YAMATO JAPANESE STEAK HOUSE, INC.

Principal Place of Business Mailing Address 681 DELMONICO STREET NE 681 DELMONICO STREET NE PALM BAY FL 32907 PALM BAY FL 32907

FILED Mar 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/15/1993 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-3201604 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Ζφ Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes ∏ No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name CARPENTER, IN T 681 DELMONICO STREET NE 82 Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32907 83 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Field stered Agent signature required when reinstating) 12. OFFICERS AND DIRLCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE ☐ Change Addition CARPENTER, IN T NAME 1.2 NAME **681 DELMONICO STREET** STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL 32907 CITY-ST-7/P 1.4 CITY-ST-ZIP DELETE Change Addition 21 THE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition NAME 32 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 41 DILE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THILE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 THLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP CITY-ST-ZIP

14. Thereby 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 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 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 only in thichment with an address.

SIGNATURE:

MARCH 10, 1991 (401) 951-1913**

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