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

PROFIT CORPORATION ANNUAL REPORT

1998

THE STATE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600001191 (1)

MIYA JAPANESE GRILL & SUSHI BAR, INC.

Principal Place of Business Mailing Address 630 TARPON BAY ROAD 630 TARPON BAY ROAD SUITE 1 DO NOT WRITE IN THIS SPACE SANIBEL FL 33957 SANIBEL FL 33957 3. Date incorporated or Qualified 01/04/1996 2. Principal Place of Business 2a. Mailino Address 4. FEI Number Applied For 21 65-0640672 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THOMPSON, LARRY C 695 TARPON BAY ROAD Street Address (P.O. Box Number is Not Acceptable) SUITE 4 83 SANIBEL FL 33957 City Zip Code 85 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE PSTD THOMPSON, LARRY C NAME 1.2 NAME 695 TARPON BAY ROAD, SUITE 4 STREET ADDRESS 1.3 STREET ADDRESS SANIBEL FL 33957 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE 4.2 NAME NAME

14. Thereby certify that the information supplied with this filling dood liot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied and appears true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the control of

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

1/15/98 941/472-848

Addition

Addition

FILED

Apr 14 1998 8:00am

Secretary of State