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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000082642

Corporation Name

JAPANESE CAFE TOKYO, INC.

	f Dueinnes	Mailing Address						•
Principal Place of Business 11870 SW 102 STREET MIA		11870 SW 102 STREET						
		MIAMI FL 33186			DO NOT WRITE IN THIS SPACE			
MIAMI FL 33186	,				3. Date Incorporated or Qu		<u> </u>	1
					09/20/1997		:	
					4. FEI Number		Appl	ied For
2. Principal Place of Business		2a. Mailing Address		65-0787325		Not Applicable \$8.75 Additional		
		26						
21	etc	Suite, Apt. #, etc.			5. Certificate of Status Des	sired 🗆	Fee Req	
Suite, Apt. #,	etc.	27			\		\$5.00 N	May Be
22		City & State			6. Election Campaign Fina	incing	Added to	
City & State		28			Trust Fund Contribution	1		
23	Country	Zip	Count	try	8. This corporation owes	ne current year	∏ZYes (□No I
Žip		29	30		Personal Property Tax	New Posistors	140	
24	25 Current		'		10. Name and Address o	New Registere	- Agont	
	9. Name and Address of Current	Registered - g		Name				
0:/:1		C. Suprable to the Co.	ļ,	OR Chrost Ada	iress (P.O. Box Number is Not	Acceptable)		
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	SW 102 STREET		}	83	11. 建基层层			
[MAM	I FL 33186					1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip C	Code
				84 City	••	F		
	o the provisions of Sections 607.050				earetion submite this statemen	t for the purpose	of changing its	registered
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a the provisions of Sections 607.050	2 and 607.1508, Florida Sta	tutes, the ab	ove-named comora	tion's board of directors. I here	by accept the ap	pointment as reg	gisterea
office of re	o the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida: Such change was tions of Section 607.0505. I	Florida Statu	tes.				
agent. I ar	n familiar with, and accept the obliga					DATE		 .
Į.	Signature, typed or printed name of registered age				the second section of the St. A.			
		of and title if applicable.	TE: Registered	Agent signature requ	ired when reinstating)	TO OFFICE	AND DIRECTO)RS IN 12
O.O.	Signature, typed or printed name of registered ego	If Brid and it oppose	TE: Registered	Agent signature requ	ADDITIONS/CHANGES	TO OFFICERS	AND DIRECTO	DRS IN 12 Addition
12.	OFFICERS AN	nt and title if applicable. (NT) ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES	TO OFFICERS	AND DIRECTO	RS IN 12 ☐ Addition
	D OFFICERS AN	ID DIRECTORS	13.	LE	ADDITIONS/CHANGES	TO OFFICERS	AND DIRECTO	Addition
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14. I hereby 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 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 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 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 on an attachment with an address, with all other like empowered.

FILED

Feb 03, 1999 8:00am

Secretary of State

02-03-1999 90010 045 ***150.00