

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2025 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
A	This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☐ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan HAWAI'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN
1b	Three-digit plan number (PN) ▶ 501
1c	Effective date of plan 05/01/2019
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) HAWAI'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN 2909 WAIALAE AVE PMB 22 HONOLULU, HI 96826-1833
2b	Employer Identification Number (EIN) 23-7057621
2c	Plan Sponsor's telephone number 808-944-9105
2d	Business code (see instructions) 813000

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	07/12/2026	PAUL KAISER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor HAWAII MANAGEMENT ALLIANCE BENEFITS AND SERVICES, INC. 220 S KING ST STE 1200 HONOLULU, HI 96813-4589	3b Administrator's EIN 99-0305447 3c Administrator's telephone number 808-591-0088
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 1150
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 1149 6a(2) 1186 6b 2 6c 0 6d 1188 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

4A 4D 4E 4B 4Q

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☐ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☐ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☒ **A** (Insurance Information) – Number Attached 1
- (4) ☐ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☒ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☒ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code 173901352

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan HAWAI'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 HAWAI'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN	D Employer Identification Number (EIN) 23-7057621	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
HAWAII MEDICAL ASSURANCE ASSOCIATION

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
99-0281791	48330	HMAA	1188	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 224510	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
GUY TANIOKA
220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
45344			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
GRACE BEYMER
220 SOUTH KING ST STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
30760			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MANDI TAOKA

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
20818			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHUCK TONDA

220 SOUTH KING ST STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
18429			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GAVIN TOMA

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13713			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

P.S.H. INSURANCE, INC.

737 BISHOP ST
STE 2120
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9790			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JIM FRENCH

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9137			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMIE REICH

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8642			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MERCER HEALTH & BENEFITS, LLC

1166 AVENUE OF THE AMERICAS
NEW YORK, NY 10036-2708

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6396			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ORI-GEN NOGUCHI, LLC DBA NOGUCHI &

1314 S KING ST
STE 560
HONOLULU, HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6262			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ADVANTAGE INSURANCE SERVICES, INC.

1580 MAKALO ST
STE 1220
HONOLULU, HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6019			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HI INSURANCE & FINANCIAL SERVICES

1009 KAPIOLANI BLVD
STE 2804
HONOLULU, HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5582			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALOHA EMPLOYEE BENEFITS INSURANCE

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4770			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SWITCHUP INSURANCE, LLC

439 KEONIANA ST
HONOLULU, HI 96815

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4407			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BROWN & BROWN PACIFIC INSURANCE SER

700 BISHOP ST
STE 1400
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4219			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PACIFIC BUSINESS SOLUTIONS

PO BOX 240655
HONOLULU, HI 96824

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3771			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MAURICE NITTA

98-487 KOAUKA LOOP
#B204
AIEA, HI 96701

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3574			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PROINSURANCE HAWAII, LLC

4348 WAIALAE AVE
STE 101
HONOLULU, HI 96816

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3356			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ARI MATSUMURA

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3087			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RTEA CORP DBA MUTUAL UNDERWRITERS

680 IWILEI RD
STE 760
HONOLULU, HI 96817

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2999			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAYE CABACUNGAN

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2489			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALKEME INSURANCE SERVICES, INC. DBA

220 SOUTH KING ST
STE 1200
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2374			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AE & ASSOC INS SERVICES, LLC

615 PIKOI ST
STE 302
HONOLULU, HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2068			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BILL H.B. LEUNG

1189 WAIMANU ST
STE 1409
HONOLULU, HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1960			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HOGAN CONSULTING GROUP, LLC

1088 BISHOP ST
STE 1224
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1683			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ATLAS INSURANCE

201 MERCHANT ST
STE 1100
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1202			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

FINANCE INSURANCE, LTD

1164 BISHOP ST
STE 400
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1025			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAHIKINA CONSULTANTS

68 KUMULAAU OHIA LOOP
WAILUKU, HI 96793

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
359			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

INSURANCE FACTORS

745 BISHOP ST
STE 1000
HONOLULU, HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
275			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)	7c(5)	
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)	7e(4)	
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☒ Health (other than dental or vision)
b ☒ Dental
c ☒ Vision
d ☒ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☒ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	8785506
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

Form 5500
Multiple-Employer Welfare Plan
Participating Employer Information

Plan Name: Hawai'i Restaurant Association Group Health Plan
EIN: 23-7057621
PN: 501
PYE: December 31, 2025

<u>PARTICIPATING EMPLOYER</u>	<u>EIN</u>
15200 HALEAKALA HWY LLC	883614940
2 KIM, INC.	260442388
2535 COYNE CORP	271029083
3-STAR GOURMET RESTAURANT II, LLC	262640614
4K HAWAII PACIFIC, LLC	990818705
510 SISTERS, INC.	882187571
808 CATERING CO, LLC	934057138
80EIGHTOAO, LLC	882399184
ACAI PARTNERS HAWAII, LLC	934659290
AHUALOA FAMILY FARMS, LLC	822997455
AINA KAUAI RESTAURANT, LLC	862624376
ALA WAI L&L HB, INC.	813420697
ALOHA CULINARY GROUP, LLC	851217576
AMYMDH, LLC	453847619
ANAHKAHNA, INC.	474121153
ANGP, LLC	383858445
AROMA ITALIA, LLC	874653817
B.I.G FAMILY, LLC	852005313

BABES BAKERY, LLC	871563525
BACK STREET FOOD CO 2GO, LLC	833194565
BAMBOO CATERING, INC.	8248665562
BANYAN'S KAILUA, INC.	993699695
BEACH DREAMS, LLC	205636035
BEASTSIDE VENTURES, INC.	922609777
BENIYA, LLC	332222515
BETHAM PACIFIC, LLC	562322783
BLACK ROCK PIZZA, LLC	850820996
BLUE PACIFIC MANAGEMENT, LLC	205798539
BMR RESTAURANT, LLC	881413624
BOSSY PANDA, LLC	814335108
BREAKER'S HALEIWA, LLC	822230332
BRICK FIRE TAVERN KAIMUKI, LLC	474553192
BUBBA & FINN'S, LLC	815487617
CAPTAIN JACK'S, LLC	272777797
CHAO RESTAURANT, LLC	9983823616
CHARIAN CORPORATION	874344239
CHILL SPACE, LLC	461779798
CHOICE MAUI, LLC	274924388
CHONGS ENTERPRISE, LLC	871314085
CJ RESTAURANT, INC.	814048006
CM3, LLC dba THE PINT & CORK	472875489
COSTA BLUE HAWAII, INC.	352682126

CRONIES BAR & GRILL	943269363
CTC ENTERPRISES, INC.	201067516
DA SPOT FOOD, LLC	364756425
DAIICHI RAMEN AT PEARL CITY, INC.	821757105
DEBMARC, INC.	990320318
DOMO CAFÉ AIEA, LLC	332219389
DON'S CHINESE KITCHEN, INC.	880565409
DRAGON77 ENTERPRISES, LLC	881119995
DRAGONFLY HOSPITALITY GROUP, LLC	990671717
DUCK & ASSOCIATES, INC.	270954017
E&Y NOODLE, INC.	271487414
EARTH ALOHA EATS, LLC	841804626
EAST SIDE ASSOC. LLC	921425432
EASY OVER HAWAII, INC.	331779166
ENCHANTED LAKE HB, INC.	923364217
FAN'S ENTERPRISE, INC.	881129877
FAT PUB, LLC	843097197
FILLOS KAUAI, LLC	862840333
FINEST HAWAIIAN COFFEES, LLC	933542799
FLYNN RESTAURANTS, LLC	331243201
FONG'S MEAT MARKET, INC.	471327119
FORC, LLC	853774429
FUJI JAPANESE RESTAURANT, INC.	883527106
G&B MOLOKAI ENTERTAINMENT COMPANY, LLC	922515447

G&C FREITAS RANCH, INC.	990097047
GANESH DOSA, LLC	831549865
GECKO GIRLZ, LLC	832040869
GENJI, INC.	990218123
GOLDEN GOAT ENTERPRISES, LLC	872640675
GORDON, LLC	871898141
GRS, LLC	92375471
GUAVA SMOKED, LLC	273612666
H.S. NAM, LLC	853890928
H.W.A.T CO INC	931786894
H2 RESTAURANT, INC.	993158681
HAPPINESS KONA, LLC	992693243
HAPPY MAKES COMPANY	471257099
HARBOR HOUSE KONA, LLC	863622572
HATSUHANNA HAWAII, INC.	990213658
HAVIK, LLC	844909568
HAWAII LAUNDRY AND GARMENTS, INC.	331675092
HAWAIIAN ISLAND CAFÉ, LLC	464972910
HI DOTS, INC.	882187571
HILO BURGER JOINT, LLP	452678876
HILO TRADING CO, LTD.	990202510
HINSON INVESTMENT, INC.	842417003
HNL BURGER CO, LLC	272535182
HO WAN, INC.	990351905

HOMETOWN CANTEEN, LLC	853525430
HONGY, LLC	992633589
HONOKAA BROTHERS, LLC	010973919
HONOKAA PUBLIC HOUSE, LLC	833479156
HONOKOHAU L&L HB, INC.	461585641
HO'OKIPA PARTNERS, LLC	853602626
HOPPER MAUI, INC.	472397360
HOT POT HEAVEN, INC.	271012708
HSC HILO, LLC	275438498
HUI HUANG, LLC	921317661
I LOVE GRILL RESTAURANT, INC.	331723680
INTEGRITY CHEM, LLC	263007906
IREH RESTAURANT, INC.	454246426
ISLAND VIBES CAFÉ, LLC	923346664
ISTANBUL RESTAURANT, INC.	813658318
JAMU, INC.	472607549
JCB DRY CLEANING, INC.	990324110
JH WANG, LLC	932993975
JIREH MEDIA, LLC	274122321
JJOY COMPANY, INC.	273744255
JNS THAI, LLC	821473093
JONES MCKNIGHT VENTURE, LLC	331610959
JP FAMILY ENTERPRISES, INC.	201564180
JR OHANA GRILL	884322456

JRS FOOD CORPORATION	921218771
JUCCI LUCCI F&B, LLC	831429670
JUMBO POPCORN, LLC	831475533
K BAY BROS TOO, LLC	993761011
K.K. RANCH, INC.	990163456
KAHAI STREET KITCHEN, LLC	710999120
KAHALA DAIICHI RAMEN, INC.	882045619
KAHUA PALIMA, LLC	874456300
KAHUKU GRILL, LLC	271442584
KAILUA BBQ, INC.	223870008
KAMITOKU, LLC	465201100
KARAI, LLC	842156508
KAUAI BREWERS, LLC	452982337
KAUAI ISLAND BREWING - KOLOA, LLC	861687010
KBAY HB, INC.	813420697
KDN ENTERPRISES, INC.	205882020
KIND KOFFEE COMPANY, LLC	832312957
KIRI THAI, LLC	872639439
KOHALA BURGER AND TACO, LLC	273650909
KOHALA VILLAGE HUB PUB & SHOP, LLC	475173469
KOPI, LLC	853483133
KRUA THAI, LLC	262829319
K-TOWN FOODS, INC.	932310162
KULO, LLC	841963396

LA POBLANA MEXICAN FOOD, LLC	853260724
LA TOUR GROUP, LLC	271692523
LANTERNS RESTAURANT AND TAVERN, LLC	933306551
LAVA TUBE WAIKIKI, INC.	823761663
LEE AND CHEONG INVESTMENT, INC.	990355154
LIANG INVESTMENT, LLC	920989335
LIANG INVESTMENT, LLC	920989335
LILIHA DRIVE-INN, INC.	812897091
LIN FONG CORP	990346709
LOVERS+FIGHTING, INC.	384269788
M.I.K. USA, LLC	272920250
MARUHIRO, INC.	872583087
MASAO PROPERTIES, INCORPORATED	455445540
MCDANG, LLC	831493270
MEDITERRANEAN GOURMET FOOD, INC.	990165233
MEGRACE COMPANY, LLC	465769775
MEKIKO CANTINA, LLC	862935406
MIAN HONOLULU, LLC	824308266
MIDDLE EATS, LLC	880536335
MILILANI MAUKA L&L HB, INC.	461038411
MINASAH, LLC	871557134
MING DYNASTY FISH & SHRIMP CO, INC.	202557471
MIYAKONJO HAWAII, LLC	830550686
MONICO'S TAQUERIA, LLC	821313148

MOUNTAIN MAGIC SHAVE ICE, LLC	832307958
MR OJISAN, INC.	990338098
MR TEA WARD, LLC	992567988
NAMI KAZE, LLC	871945730
NANA AI KATSU, LLC	851994958
NAPALI BREWING COMPANY, LLC	814428384
NAPUA HILO, LLC	931736052
NATSUNOYA TEA HOUSE, LLC	990118088
NEW CENTURY GROUP, LLC	844095193
NEW FIELD HONOLULU, INC.	943461204
NI ENTERPRISE, LLC	871542081
NIU BAGUETTE BBQ & NOODLE SOUP, LLC	832235783
NORI BAR HONOLULU, LLC	882929915
NORTH SHORE PROVISIONS, LLC	205709541
NOT WAVING BUT DROWING RESTAURANT GROUP, LLC	833627211
OAQ SUSHI GO, LLC	872039967
OHANA FIVE STARS, INC.	883912360
O'KIMS, LLC	812202529
OLIVER GROUP, LLC	334359604
OLIVIA PHOMMACHANH	994481656
ONE 38, INC.	813226586
ONE GREEK, LLC	932700168
ONE PLUS ONE, INC.	372147068
ONO HOME KITCHEN, INC.	847509161

PACIFIC HI-TAK, INC.	990185300
PACRIM MARKETING GROUP	990277752
PAESANO AT WAIMALU, LLC	260268111
PALATE KILAUEA, LLC	472033123
PALOLO FARMS, LLC	460707637
PAPAALOA MARKET & CAFÉ, LLC	462538675
PARADISE POKE HAWAII, LLC	853604532
PATH FOOD CO., LTD	990302463
PLATINUM PARTNERS, INC.	842393623
PLAY ENTERPRISE, LLC	830545025
POINT HB, LLC	851246166
PONO POTIONS, INC.	841820299
PONO RESTAURANT, LLC	371949515
PORTILLO SALES & MARKETING	474180824
POUNDERS RESTAURANT, LLC	992579333
QUEEN'S MARKETPLACE HB, INC.	881536462
QUEEN'S WAIKIKI LUAU, LLC	871639140
RAINBOW F&B, INC.	814886698
RANT DEVELOPMENT HOLDINGS, LLC	882321796
RESTAURANT EQUIPMENT HAWAII, LLC	813861074
RESTAURANT EQUIPMENT WHOLESALERS, INC.	200950080
RESTAURANT LIMA, LLC	873515948
RESTAURANTS KAUAI, LLC	993068260
ROMY'S KAHUKU PRAWNS & FISH, INC.	990345289

ROYAL WAIKIKI L&L, INC.	863401399
RUSINKO ENTERPRISES, LLC	205709541
RUYEE, LLC	271046019
RW RESTAURANT, LLC	921208850
SAGE CREAMERY, LLC	862518557
SAIMIN DOJO, INC.	823795521
SAKURA JAPANESE RESTAURANT, INC.	460659528
SANDWICH ISLE BREAD COMPANY, LLC	813802788
SANTA INTERNATIONAL, INC.	204235199
SCANDIS SHAVE ICE, LLC	334050389
SEASONS TAIWANESE EATERY, LLC	920834546
SECOND WAVE PROVISIONS, LLC	922398323
SHIKEDA, LLP	844905088
SHOREFYRE, INC.	271484024
SI MING INVESTMENT, LLC	934524061
SOUTHERN ALOHA HOSPITALITY GROUP, LLC	823710856
STEP USA, INC.	844868718
SUBWAY CITY, INC.	932877324
SUGOI, LLC	990346997
SUPERB, INC.	943261045
T&T HOLDINGS, LLC	990414367
TAHITI NUI ENTERPRISES, INC.	920189080
TAQUERIA EL RACHERO, LLC	472355908
TASTE TEA, INC.	454738701

TDM LEGACY, INC.	932724485
TEAPRESSO BAR WAHIAWA, LLC	843315985
TEISHOKU, INC.	475525673
TEN SECONDS YUNNAN RICE NOODLE HI, LLC	883163223
TEPPANYAKI FARMER, LLC	813941759
THAI BISTRO CORPORATION	822093728
THE HAPPY BENTO, LLC	814389960
THOMAS NAYLOR, LLC	465361446
TIKEHAU LOUNGE, LLC	883637395
TIKI INIKI, LLC	460755916
TIMMY TOM'S LLC	471744702
TORORO, LLC	994611855
TOYOTOMI USA, INC.	461873968
TRANSACT HAWAII, LLC	474956971
TS GRASP, INC.	863314273
UNCLE D'S ENTERPRISES, LLC	472973116
UNITED PARTNERSHIP, LLC	470917096
UOTARO USA, INC.	384053061
VEGETATE, LLC	332990810
V-LAND HOSPITALITY, LLC	994172597
VLIM, INC.	824387232
WAIHAOLE POI FACTORY, LLC	990156391
WAIKOLOA VILLAGE HB, INC.	881556537
WALEA AGRICULTURAL GROUP, INC.	912173320

WANGCHANG CORPORATION	842371329
WAYLON WILDE, INC.	990757329
WHISKEY SMOKE 808, LLC	863484019
WINDWARD GRILL, INC.	260714264
WONJIN CORPORATION	452801307
WOODSIDE, LLC	471627253
WRANGLER'S STEAKHOUSE	990233584
X&L INVECH, LLC	823123559
XIAOYANZI, LLC	922174702
YHIL, INC.	820697257
YODA, LLC	852813016
YOU KNOW THE DRILL, LLC	822738431
Y'S FAMILY ENTERPRISES, LLC	204802164
YUNG YEE KEE DIM SUM, LLC	843155217
2 KIM, INC.	26-0442388
2535 COYNE CORP	27-1029083
3-STAR GOURMET RESTAURANT II, LLC	26-2640614
510 SISTERS, INC.	88-2187571
80EIGHTOAO, LLC	88-2399184
AINA KAUAI RESTAURANT, LLC	86-2624376
AINANA INVESTMENT, LLC	92-1843591
AMYMDH, LLC	45-3847619
ANAHKAHNA, INC.	47-4121153
ANGP, LLC	38-3858445

AROMA ITALIA, LLC	87-4653817
B.I.G FAMILY, LLC	85-2005313
BACK STREET FOOD CO 2GO, LLC	83-3194565
BANYAN'S KAILUA, INC.	99-3699695
BEACH DREAMS, LLC	20-5636035
BETHAM PACIFIC, LLC	56-2322783
BIG ISLAND RESTAURANT GROUP, LLC	88-4322456
BIG TIM'S INC.	99-0270577
BLACK ROCK PIZZA, LLC	85-0820996
BLUE PACIFIC MANAGEMENT, LLC	20-5798539
BMR RESTAURANT, LLC	88-1413624
BOSSY PANDA, LLC	81-4335108
BREAKER'S HALEIWA, LLC	82-2230332
BRICK FIRE TAVERN KAIMUKI, LLC	47-4553192
BUBBA & FINN'S, LLC	81-5487617
CAPTAIN JACK'S, LLC	27-2777797
CHARIAN CORPORATION	87-4344239
CHILL SPACE, LLC	46-1779798
CHOICE MAUI, LLC	27-4924388
CJ RESTAURANT, INC.	81-4048006
CM3, LLC dba THE PINT & CORK	47-2875489
CRONIES BAR & GRILL	94-3269363
CTC ENTERPRISES, INC.	20-1067516
DA SPOT FOOD, LLC	36-4756425

DEBMARC, INC.	99-0320318
DON'S CHINESE KITCHEN, INC.	88-0565409
DRAGON77 ENTERPRISES, LLC	88-1119995
DRAGONFLY HOSPITALITY GROUP, LLC	99-0671717
DUCK & ASSOCIATES, INC.	27-0954017
DYNASTY KAHUKU SHRIMP COMPANY, INC.	83-3550499
EARTH ALOHA EATS, LLC	84-1804626
EAST SIDE ASSOC. LLC	92-1425432
ENCHANTED LAKE HB, INC.	92-3364217
FAN'S ENTERPRISE, INC.	88-1129877
FAT PUB, LLC	84-3097197
FILLOS KAUAI, LLC	86-2840333
FINEST HAWAIIAN COFFEES, LLC	93-3542799
FISCHLER ENTERPRISES, LLC	26-3293536
FLYNN RESTAURANTS, LLC	33-1243201
FONG'S MEAT MARKET, INC.	47-1327119
FORC, LLC	85-3774429
FORMOSADELI, LLC	93-3215103
FUJI JAPANESE RESTAURANT, INC.	88-3527106
G&B MOLOKAI ENTERTAINMENT COMPANY, LLC	92-2515447
G&C FREITAS RANCH, INC.	99-0097047
GANESH DOSA, LLC	83-1549865
GECKO GIRLZ, LLC	83-2040869

GENJI, INC.	99-0218123
GOLDEN GOAT ENTERPRISES, LLC	87-2640675
GRS, LLC	92-375471
GUAVA SMOKED, LLC	27-3612666
H.S. NAM, LLC	85-3890928
H.W.A.T CO INC	93-1786894
HATSUHANNA HAWAII, INC.	99-0213658
HAUMANA MAUI, LLC	83-4554996
HAVIK, LLC	84-4909568
HAWAIIAN ISLAND CAFÉ, LLC	46-4972910
HI DOTS, INC.	88-2187571
HILO TRADING CO, LTD.	99-0202410
HINSON INVESTMENT, INC.	84-2417003
HNL BURGER CO, LLC	27-2535182
HOMETOWN CANTEEN, LLC	85-3525430
HONGY, LLC	99-2633589
HONOKAA BROTHERS, LLC	01-0973919
HONOKAA PUBLIC HOUSE, LLC	83-3479156
HONOKOHAU L&L HB, INC.	46-1585641
HO'OKIPA PARTNERS, LLC	85-3602626
HOPPER MAUI, INC.	47-2397360
HOT POT HEAVEN, INC.	27-1012708
HSC HILO, LLC	27-5438498
INTEGRITY CHEM, LLC	26-3007906

IREH RESTAURANT, INC.	45-4246426
ISLAND VIBES CAFÉ, LLC	92-3346664
ISTANBUL RESTAURANT, INC.	81-3658318
JAMU, INC.	47-2607549
JCB DRY CLEANING, INC.	99-0324110
JH WANG, LLC	93-2993975
JIREH MEDIA, LLC	27-4122321
JJOY COMPANY, INC.	27-3744255
JNS THAI, LLC	82-1473093
JP FAMILY ENTERPRISES, INC.	20-1564180
JRS FOOD CORPORATION	92-1218771
JUCCI LUCCI F&B, LLC	83-1429670
K.K. RANCH, INC.	99-0163456
KAHAI STREET KITCHEN, LLC	71-0999120
KAHUA PALIMA, LLC	87-4456300
KAILUA BBQ, INC.	22-3870008
KARAI, LLC	84-2156508
KAUAI BREWERS, LLC	45-2982337
KAUAI ISLAND BREWING - KOLOA, LLC	86-1687010
KBAY HB, INC.	81-3420697
KDN ENTERPRISES, INC.	20-5882020
KOHALA VILLAGE HUB PUB & SHOP, LLC	47-5173469
KOHOLA-SKANA, LLC	87-3944273
KRUA THAI, LLC	26-2829319

K-TOWN FOODS, INC.	93-2310162
KULO, LLC	84-1963396
LA TOUR GROUP, LLC	27-1692523
LANTERNS RESTAURANT AND TAVERN, LLC	93-3306551
LAVA TUBE WAIKIKI, INC.	82-3761663
LEE AND CHEONG INVESTMENT, INC.	99-0355154
LIANG INVESTMENT, LLC	92-0989335
LILIHA DRIVE-INN, INC.	81-2897091
LIN FONG CORP	99-0346709
LOVERS+FIGHTING, INC.	38-4269788
M.I.K. USA, LLC	27-2920250
MARUHIRO, INC.	87-2583087
MEDITERRANEAN GOURMET FOOD, INC.	99-0165233
MEGRACE COMPANY, LLC	46-5769775
MEKIKO CANTINA, LLC	86-2935406
MIAN HONOLULU, LLC	82-4308266
MINASAH, LLC	87-1557134
MING DYNASTY FISH & SHRIMP CO INC.	20-2457471
MIYAKONJO HAWAII, LLC	83-0550686
MOUNTAIN MAGIC SHAVE ICE, LLC	83-2307958
MR OJISAN, INC.	99-0338098
MR TEA WARD, LLC	99-2567988
NANA AI KATSU, LLC	85-1994958
NAPUA HILO, LLC	93-1736052

NATSUNOYA TEA HOUSE, LLC	99-0118088
NEW CENTURY GROUP, LLC	84-4095193
NEW FIELD HONOLULU, INC.	94-3461204
NIU BAGUETTE BBQ & NOODLE SOUP, LLC	83-2235783
NORI BAR HONOLULU, LLC	88-2929915
NORTH SHORE PROVISIONS, LLC	20-5709541
OHANA FIVE STARS, INC.	88-3912360
ONE 38, INC.	81-3226586
ONE PLUS ONE, INC.	37-2147068
PACRIM MARKETING GROUP	99-0277752
PAESANO AT WAIMALU, LLC	26-0268111
PALATE KILAUEA, LLC	47-2033123
PARADISE POKE HAWAII, LLC	85-3604532
PATH FOOD CO., LTD	99-0302463
PHO TIME 2 CORP	84-2591947
PIETRO'S POIPU, LLC	83-2363354
PLATINUM PARTNERS, INC.	84-2393623
PLAY ENTERPRISE, LLC	83-0545025
POINT HB, LLC	85-1246166
PONO POTIONS, INC.	84-1820299
PONO RESTAURANT, LLC	37-1949515
PORTILLO SALES & MARKETING	47-4180824
POUNDERS RESTAURANT, LLC	99-2579333
QUEEN'S WAIKIKI LUAU, LLC	87-1639140

RAINBOW F&B, INC.	81-4886698
RAINBOW HEART, LLC	85-1590561
RANT DEVELOPMENT HOLDINGS, LLC	88-2321796
RESTAURANT EQUIPMENT HAWAII, LLC	81-3861074
RESTAURANT EQUIPMENT WHOLESALERS, INC.	20-0950080
RESTAURANT LIMA, LLC	87-3515948
ROMY'S KAHUKU PRAWNS & FISH, INC.	99-0345289
RUSINKO ENTERPRISES, LLC	20-5709541
RUYEE, LLC	27-1046019
RW RESTAURANT, LLC	92-1208850
SAGE CREAMERY, LLC	86-2518557
SAIMIN DOJO, INC.	82-3795521
SAKURA JAPANESE RESTAURANT, INC.	46-0659528
SANDWICH ISLE BREAD COMPANY, LLC	81-3802788
SANTA INTERNATIONAL, INC.	20-4235199
SEASONS TAIWANESE EATERY, LLC	92-0834546
SECOND WAVE PROVISIONS, LLC	92-2398323
SHIKEDA, LLP	84-4905088
SHOREFYRE, INC.	27-1484024
SI MING INVESTMENT, LLC	93-4524061
SOUTHERN ALOHA HOSPITALITY GROUP, LLC	82-3710856
SUGOI, LLC	99-0346997
SUPERB, INC.	94-3261045

T&T HOLDINGS, LLC	99-0414367
TAQUERIA EL RACHERO, LLC	47-2355908
TASTE TEA, INC.	45-4738701
TDM LEGACY, INC.	93-2724485
TEN SECONDS YUNNAN RICE NOODLE HI, LLC	88-3163223
TEPPANYAKI FARMER, LLC	81-3941759
THAI BISTRO CORPORATION	82-2093728
THOMAS NAYLOR, LLC	46-5361446
TIKEHAU LOUNGE, LLC	88-3637395
TIKI INIKI, LLC	46-0755916
TS GRASP, INC.	86-3314273
TWO PEAS, LLC	88-0625574
UNCLE D'S ENTERPRISES, LLC	47-2973116
UNITED PARTNERSHIP, LLC	47-0917096
UOTARO USA, INC.	38-4053061
V-LAND HOSPITALITY, LLC	99-4172597
VLIM, INC.	82-4387232
WAIAHOLE POI FACTORY, LLC	99-0156391
WAIKOLOA VILLAGE HB, INC.	88-1556537
WAILEA AGRICULTURAL GROUP, INC.	91-2173320
WANGCHANG CORPORATION	84-2371329
WAYLON WILDE, INC.	99-0757329
WAYNE K TAKUSHI	99-0344296
WINDWARD GRILL, INC.	26-0714264

WONJIN CORPORATION	45-2801307
WOODSIDE, LLC	47-1627253
WRANGLER'S STEAKHOUSE	99-0233584
XIAOYANZI, LLC	92-2174702
YODA, LLC	85-2813016
YOU KNOW THE DRILL, LLC	82-2738431

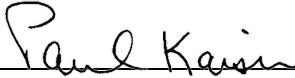
Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2025 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
A	This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☐ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information	
1a	Name of plan HAWAI 'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN	1b Three-digit plan number (PN) ▶ 501
		1c Effective date of plan 05/01/2019
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) HAWAI 'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN 2909 WAIALAE AVE PMB 22 HONOLULU HI 96826-1833	2b Employer Identification Number (EIN) 23-7057621 2c Plan Sponsor's telephone number 808-944-9105 2d Business code (see instructions) 813000
	2909 WAIALAE AVE PMB 22 HONOLULU HI 96826-1833	

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE		7/21/2026	PAUL KAISER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor HAWAII MANAGEMENT ALLIANCE BENEFITS AND SERVICES, INC. 220 S KING ST STE 1200 HONOLULU HI 96813-4589	3b Administrator's EIN 99-0305447 3c Administrator's telephone number 808-591-0088
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 1,150
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 1,149 6a(2) 1,186 6b 2 6c 0 6d 1,188 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions: 4A 4D 4E 4B 4Q	

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☐ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) ☐ DCG (Individual Plan Information) – Number Attached _____ (5) ☐ MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) ☐ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ A (Insurance Information) – Number Attached <u>1</u> (4) ☐ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☒ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☒ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code 000173901352

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
A Name of plan HAWAI'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN	B Three-digit plan number (PN) ► 501
C Plan sponsor's name as shown on line 2a of Form 5500 HAWAI'I RESTAURANT ASSOCIATION GROUP HEALTH PLAN	D Employer Identification Number (EIN) 23-7057621

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier HAWAII MEDICAL ASSURANCE ASSOCIATION					
(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
99-0281791	48330	HMAA	1,188	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
224,510	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid	
GUY TANIOKA 220 SOUTH KING ST STE 1200 HONOLULU HI 96813	

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
45,344			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GRACE BEYMER 220 SOUTH KING ST STE 1200 HONOLULU HI 96813	
---	--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
30,760			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MANDI TAOKA
220 SOUTH KING ST
STE 1200
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
20,818			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHUCK TONDA
220 SOUTH KING ST STE 1200
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
18,429			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GAVIN TOMA
220 SOUTH KING ST
STE 1200
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13,713			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

P.S.H. INSURANCE, INC.
737 BISHOP ST
STE 2120
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9,790			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JIM FRENCH
220 SOUTH KING ST
STE 1200
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9,137			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMIE REICH
 220 SOUTH KING ST
 STE 1200
 HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8,642			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MERCER HEALTH & BENEFITS, LLC
 1166 AVENUE OF THE AMERICAS

NEW YORK NY 10036-2708

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6,396			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ORI-GEN NOGUCHI, LLC DBA NOGUCHI &
 1314 S KING ST
 STE 560
 HONOLULU HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6,262			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ADVANTAGE INSURANCE SERVICES, INC.
 1580 MAKALO ST
 STE 1220
 HONOLULU HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6,019			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HI INSURANCE & FINANCIAL SERVICES
 1009 KAPIOLANI BLVD
 STE 2804
 HONOLULU HI 96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5,582			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALOHA EMPLOYEE BENEFITS INSURANCE
220 SOUTH KING ST
STE 1200
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4,770			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SWITCHUP INSURANCE, LLC
439 KEONIANA ST

HONOLULU HI 96815

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4,407			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BROWN & BROWN PACIFIC INSURANCE SER
700 BISHOP ST
STE 1400
HONOLULU HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4,219			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PACIFIC BUSINESS SOLUTIONS
PO BOX 240655

HONOLULU HI 96824

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3,771			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MAURICE NITTA
98-487 KOAUKA LOOP
#B204
AIEA HI 96701

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3,574			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PROINSURANCE HAWAII, LLC
4348 WAIALAE AVE
STE 101
HONOLULU

HI 96816

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3,356			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ARI MATSUMURA
220 SOUTH KING ST
STE 1200
HONOLULU

HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3,087			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RTEA CORP DBA MUTUAL UNDERWRITERS
680 IWILEI RD
STE 760
HONOLULU

HI 96817

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2,999			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAYE CABACUNGAN
220 SOUTH KING ST
STE 1200
HONOLULU

HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2,489			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALKEME INSURANCE SERVICES, INC. DBA
220 SOUTH KING ST
STE 1200
HONOLULU

HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2,374			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AE & ASSOC INS SERVICES, LLC

615 PIIKOI ST

STE 302

HONOLULU

HI

96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2,068			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BILL H.B. LEUNG

1189 WAIMANU ST

STE 1409

HONOLULU

HI

96814

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1,960			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HOGAN CONSULTING GROUP, LLC

1088 BISHOP ST

STE 1224

HONOLULU

HI

96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1,683			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ATLAS INSURANCE

201 MERCHANT ST

STE 1100

HONOLULU

HI

96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1,202			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

FINANCE INSURANCE, LTD

1164 BISHOP ST

STE 400

HONOLULU

HI

96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1,025			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAHIKINA CONSULTANTS
68 KUMULAAU OHIA LOOP

WAILUKU HI 96793

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
359			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

INSURANCE FACTORS
745 BISHOP ST
STE 1000
HONOLULU

HI 96813

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
275			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account.....	7c(4)	
(5) Other (specify below)	7c(5)	
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☒ Health (other than dental or vision)
b ☒ Dental
c ☒ Vision
d ☒ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☒ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	8,785,506
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

Form 5500
Multiple-Employer Welfare Plan
Participating Employer Information

Plan Name: Hawai'i Restaurant Association Group Health Plan
EIN: 23-7057621
PN: 501
PYE: December 31, 2025

<u>PARTICIPATING EMPLOYER</u>	<u>EIN</u>
15200 HALEAKALA HWY LLC	883614940
2 KIM, INC.	260442388
2535 COYNE CORP	271029083
3-STAR GOURMET RESTAURANT II, LLC	262640614
4K HAWAII PACIFIC, LLC	990818705
510 SISTERS, INC.	882187571
808 CATERING CO, LLC	934057138
80EIGHTOAO, LLC	882399184
ACAI PARTNERS HAWAII, LLC	934659290
AHUALOA FAMILY FARMS, LLC	822997455
AINA KAUAI RESTAURANT, LLC	862624376
ALA WAI L&L HB, INC.	813420697
ALOHA CULINARY GROUP, LLC	851217576
AMYMDH, LLC	453847619
ANAHKAHNA, INC.	474121153
ANGP, LLC	383858445
AROMA ITALIA, LLC	874653817
B.I.G FAMILY, LLC	852005313

BABES BAKERY, LLC	871563525
BACK STREET FOOD CO 2GO, LLC	833194565
BAMBOO CATERING, INC.	8248665562
BANYAN'S KAILUA, INC.	993699695
BEACH DREAMS, LLC	205636035
BEASTSIDE VENTURES, INC.	922609777
BENIYA, LLC	332222515
BETHAM PACIFIC, LLC	562322783
BLACK ROCK PIZZA, LLC	850820996
BLUE PACIFIC MANAGEMENT, LLC	205798539
BMR RESTAURANT, LLC	881413624
BOSSY PANDA, LLC	814335108
BREAKER'S HALEIWA, LLC	822230332
BRICK FIRE TAVERN KAIMUKI, LLC	474553192
BUBBA & FINN'S, LLC	815487617
CAPTAIN JACK'S, LLC	272777797
CHAO RESTAURANT, LLC	9983823616
CHARIAN CORPORATION	874344239
CHILL SPACE, LLC	461779798
CHOICE MAUI, LLC	274924388
CHONGS ENTERPRISE, LLC	871314085
CJ RESTAURANT, INC.	814048006
CM3, LLC dba THE PINT & CORK	472875489
COSTA BLUE HAWAII, INC.	352682126

CRONIES BAR & GRILL	943269363
CTC ENTERPRISES, INC.	201067516
DA SPOT FOOD, LLC	364756425
DAIICHI RAMEN AT PEARL CITY, INC.	821757105
DEBMARC, INC.	990320318
DOMO CAFÉ AIEA, LLC	332219389
DON'S CHINESE KITCHEN, INC.	880565409
DRAGON77 ENTERPRISES, LLC	881119995
DRAGONFLY HOSPITALITY GROUP, LLC	990671717
DUCK & ASSOCIATES, INC.	270954017
E&Y NOODLE, INC.	271487414
EARTH ALOHA EATS, LLC	841804626
EAST SIDE ASSOC. LLC	921425432
EASY OVER HAWAII, INC.	331779166
ENCHANTED LAKE HB, INC.	923364217
FAN'S ENTERPRISE, INC.	881129877
FAT PUB, LLC	843097197
FILLOS KAUAI, LLC	862840333
FINEST HAWAIIAN COFFEES, LLC	933542799
FLYNN RESTAURANTS, LLC	331243201
FONG'S MEAT MARKET, INC.	471327119
FORC, LLC	853774429
FUJI JAPANESE RESTAURANT, INC.	883527106
G&B MOLOKAI ENTERTAINMENT COMPANY, LLC	922515447

G&C FREITAS RANCH, INC.	990097047
GANESH DOSA, LLC	831549865
GECKO GIRLZ, LLC	832040869
GENJI, INC.	990218123
GOLDEN GOAT ENTERPRISES, LLC	872640675
GORDON, LLC	871898141
GRS, LLC	92375471
GUAVA SMOKED, LLC	273612666
H.S. NAM, LLC	853890928
H.W.A.T CO INC	931786894
H2 RESTAURANT, INC.	993158681
HAPPINESS KONA, LLC	992693243
HAPPY MAKES COMPANY	471257099
HARBOR HOUSE KONA, LLC	863622572
HATSUHANNA HAWAII, INC.	990213658
HAVIK, LLC	844909568
HAWAII LAUNDRY AND GARMENTS, INC.	331675092
HAWAIIAN ISLAND CAFÉ, LLC	464972910
HI DOTS, INC.	882187571
HILO BURGER JOINT, LLP	452678876
HILO TRADING CO, LTD.	990202510
HINSON INVESTMENT, INC.	842417003
HNL BURGER CO, LLC	272535182
HO WAN, INC.	990351905

HOMETOWN CANTEEN, LLC	853525430
HONGY, LLC	992633589
HONOKAA BROTHERS, LLC	010973919
HONOKAA PUBLIC HOUSE, LLC	833479156
HONOKOHAU L&L HB, INC.	461585641
HO'OKIPA PARTNERS, LLC	853602626
HOPPER MAUI, INC.	472397360
HOT POT HEAVEN, INC.	271012708
HSC HILO, LLC	275438498
HUI HUANG, LLC	921317661
I LOVE GRILL RESTAURANT, INC.	331723680
INTEGRITY CHEM, LLC	263007906
IREH RESTAURANT, INC.	454246426
ISLAND VIBES CAFÉ, LLC	923346664
ISTANBUL RESTAURANT, INC.	813658318
JAMU, INC.	472607549
JCB DRY CLEANING, INC.	990324110
JH WANG, LLC	932993975
JIREH MEDIA, LLC	274122321
JJOY COMPANY, INC.	273744255
JNS THAI, LLC	821473093
JONES MCKNIGHT VENTURE, LLC	331610959
JP FAMILY ENTERPRISES, INC.	201564180
JR OHANA GRILL	884322456

JRS FOOD CORPORATION	921218771
JUCCI LUCCI F&B, LLC	831429670
JUMBO POPCORN, LLC	831475533
K BAY BROS TOO, LLC	993761011
K.K. RANCH, INC.	990163456
KAHAI STREET KITCHEN, LLC	710999120
KAHALA DAIICHI RAMEN, INC.	882045619
KAHUA PALIMA, LLC	874456300
KAHUKU GRILL, LLC	271442584
KAILUA BBQ, INC.	223870008
KAMITOKU, LLC	465201100
KARAI, LLC	842156508
KAUAI BREWERS, LLC	452982337
KAUAU ISLAND BREWING - KOLOA, LLC	861687010
KBAY HB, INC.	813420697
KDN ENTERPRISES, INC.	205882020
KIND KOFFEE COMPANY, LLC	832312957
KIRI THAI, LLC	872639439
KOHALA BURGER AND TACO, LLC	273650909
KOHALA VILLAGE HUB PUB & SHOP, LLC	475173469
KOPI, LLC	853483133
KRUA THAI, LLC	262829319
K-TOWN FOODS, INC.	932310162
KULO, LLC	841963396

LA POBLANA MEXICAN FOOD, LLC	853260724
LA TOUR GROUP, LLC	271692523
LANTERNS RESTAURANT AND TAVERN, LLC	933306551
LAVA TUBE WAIKIKI, INC.	823761663
LEE AND CHEONG INVESTMENT, INC.	990355154
LIANG INVESTMENT, LLC	920989335
LIANG INVESTMENT, LLC	920989335
LILIHA DRIVE-INN, INC.	812897091
LIN FONG CORP	990346709
LOVERS+FIGHTING, INC.	384269788
M.I.K. USA, LLC	272920250
MARUHIRO, INC.	872583087
MASAO PROPERTIES, INCORPORATED	455445540
MCDANG, LLC	831493270
MEDITERRANEAN GOURMET FOOD, INC.	990165233
MEGRACE COMPANY, LLC	465769775
MEKIKO CANTINA, LLC	862935406
MIAN HONOLULU, LLC	824308266
MIDDLE EATS, LLC	880536335
MILILANI MAUKA L&L HB, INC.	461038411
MINASAH, LLC	871557134
MING DYNASTY FISH & SHRIMP CO, INC.	202557471
MIYAKONJO HAWAII, LLC	830550686
MONICO'S TAQUERIA, LLC	821313148

MOUNTAIN MAGIC SHAVE ICE, LLC	832307958
MR OJISAN, INC.	990338098
MR TEA WARD, LLC	992567988
NAMI KAZE, LLC	871945730
NANA AI KATSU, LLC	851994958
NAPALI BREWING COMPANY, LLC	814428384
NAPUA HILO, LLC	931736052
NATSUNOYA TEA HOUSE, LLC	990118088
NEW CENTURY GROUP, LLC	844095193
NEW FIELD HONOLULU, INC.	943461204
NI ENTERPRISE, LLC	871542081
NIU BAGUETTE BBQ & NOODLE SOUP, LLC	832235783
NORI BAR HONOLULU, LLC	882929915
NORTH SHORE PROVISIONS, LLC	205709541
NOT WAVING BUT DROWING RESTAURANT GROUP, LLC	833627211
OAQ SUSHI GO, LLC	872039967
OHANA FIVE STARS, INC.	883912360
O'KIMS, LLC	812202529
OLIVER GROUP, LLC	334359604
OLIVIA PHOMMACHANH	994481656
ONE 38, INC.	813226586
ONE GREEK, LLC	932700168
ONE PLUS ONE, INC.	372147068
ONO HOME KITCHEN, INC.	847509161

PACIFIC HI-TAK, INC.	990185300
PACRIM MARKETING GROUP	990277752
PAESANO AT WAIMALU, LLC	260268111
PALATE KILAUEA, LLC	472033123
PALOLO FARMS, LLC	460707637
PAPAALOA MARKET & CAFÉ, LLC	462538675
PARADISE POKE HAWAII, LLC	853604532
PATH FOOD CO., LTD	990302463
PLATINUM PARTNERS, INC.	842393623
PLAY ENTERPRISE, LLC	830545025
POINT HB, LLC	851246166
PONO POTIONS, INC.	841820299
PONO RESTAURANT, LLC	371949515
PORTILLO SALES & MARKETING	474180824
POUNDERS RESTAURANT, LLC	992579333
QUEEN'S MARKETPLACE HB, INC.	881536462
QUEEN'S WAIKIKI LUAU, LLC	871639140
RAINBOW F&B, INC.	814886698
RANT DEVELOPMENT HOLDINGS, LLC	882321796
RESTAURANT EQUIPMENT HAWAII, LLC	813861074
RESTAURANT EQUIPMENT WHOLESALERS, INC.	200950080
RESTAURANT LIMA, LLC	873515948
RESTAURANTS KAUAI, LLC	993068260
ROMY'S KAHUKU PRAWNS & FISH, INC.	990345289

ROYAL WAIKIKI L&L, INC.	863401399
RUSINKO ENTERPRISES, LLC	205709541
RUYEE, LLC	271046019
RW RESTAURANT, LLC	921208850
SAGE CREAMERY, LLC	862518557
SAIMIN DOJO, INC.	823795521
SAKURA JAPANESE RESTAURANT, INC.	460659528
SANDWICH ISLE BREAD COMPANY, LLC	813802788
SANTA INTERNATIONAL, INC.	204235199
SCANDIS SHAVE ICE, LLC	334050389
SEASONS TAIWANESE EATERY, LLC	920834546
SECOND WAVE PROVISIONS, LLC	922398323
SHIKEDA, LLP	844905088
SHOREFYRE, INC.	271484024
SI MING INVESTMENT, LLC	934524061
SOUTHERN ALOHA HOSPITALITY GROUP, LLC	823710856
STEP USA, INC.	844868718
SUBWAY CITY, INC.	932877324
SUGOI, LLC	990346997
SUPERB, INC.	943261045
T&T HOLDINGS, LLC	990414367
TAHITI NUI ENTERPRISES, INC.	920189080
TAQUERIA EL RACHERO, LLC	472355908
TASTE TEA, INC.	454738701

TDM LEGACY, INC.	932724485
TEAPRESSO BAR WAHIAWA, LLC	843315985
TEISHOKU, INC.	475525673
TEN SECONDS YUNNAN RICE NOODLE HI, LLC	883163223
TEPPANYAKI FARMER, LLC	813941759
THAI BISTRO CORPORATION	822093728
THE HAPPY BENTO, LLC	814389960
THOMAS NAYLOR, LLC	465361446
TIKEHAU LOUNGE, LLC	883637395
TIKI INIKI, LLC	460755916
TIMMY TOM'S LLC	471744702
TORORO, LLC	994611855
TOYOTOMI USA, INC.	461873968
TRANSACT HAWAII, LLC	474956971
TS GRASP, INC.	863314273
UNCLE D'S ENTERPRISES, LLC	472973116
UNITED PARTNERSHIP, LLC	470917096
UOTARO USA, INC.	384053061
VEGETATE, LLC	332990810
V-LAND HOSPITALITY, LLC	994172597
VLIM, INC.	824387232
WAIHAOLE POI FACTORY, LLC	990156391
WAIKOLOA VILLAGE HB, INC.	881556537
WALEA AGRICULTURAL GROUP, INC.	912173320

WANGCHANG CORPORATION	842371329
WAYLON WILDE, INC.	990757329
WHISKEY SMOKE 808, LLC	863484019
WINDWARD GRILL, INC.	260714264
WONJIN CORPORATION	452801307
WOODSIDE, LLC	471627253
WRANGLER'S STEAKHOUSE	990233584
X&L INVECH, LLC	823123559
XIAOYANZI, LLC	922174702
YHIL, INC.	820697257
YODA, LLC	852813016
YOU KNOW THE DRILL, LLC	822738431
Y'S FAMILY ENTERPRISES, LLC	204802164
YUNG YEE KEE DIM SUM, LLC	843155217
2 KIM, INC.	26-0442388
2535 COYNE CORP	27-1029083
3-STAR GOURMET RESTAURANT II, LLC	26-2640614
510 SISTERS, INC.	88-2187571
80EIGHTOAO, LLC	88-2399184
AINA KAUAI RESTAURANT, LLC	86-2624376
AINANA INVESTMENT, LLC	92-1843591
AMYMDH, LLC	45-3847619
ANAHKAHNA, INC.	47-4121153
ANGP, LLC	38-3858445

AROMA ITALIA, LLC	87-4653817
B.I.G FAMILY, LLC	85-2005313
BACK STREET FOOD CO 2GO, LLC	83-3194565
BANYAN'S KAILUA, INC.	99-3699695
BEACH DREAMS, LLC	20-5636035
BETHAM PACIFIC, LLC	56-2322783
BIG ISLAND RESTAURANT GROUP, LLC	88-4322456
BIG TIM'S INC.	99-0270577
BLACK ROCK PIZZA, LLC	85-0820996
BLUE PACIFIC MANAGEMENT, LLC	20-5798539
BMR RESTAURANT, LLC	88-1413624
BOSSY PANDA, LLC	81-4335108
BREAKER'S HALEIWA, LLC	82-2230332
BRICK FIRE TAVERN KAIMUKI, LLC	47-4553192
BUBBA & FINN'S, LLC	81-5487617
CAPTAIN JACK'S, LLC	27-2777797
CHARIAN CORPORATION	87-4344239
CHILL SPACE, LLC	46-1779798
CHOICE MAUI, LLC	27-4924388
CJ RESTAURANT, INC.	81-4048006
CM3, LLC dba THE PINT & CORK	47-2875489
CRONIES BAR & GRILL	94-3269363
CTC ENTERPRISES, INC.	20-1067516
DA SPOT FOOD, LLC	36-4756425

DEBMARC, INC.	99-0320318
DON'S CHINESE KITCHEN, INC.	88-0565409
DRAGON77 ENTERPRISES, LLC	88-1119995
DRAGONFLY HOSPITALITY GROUP, LLC	99-0671717
DUCK & ASSOCIATES, INC.	27-0954017
DYNASTY KAHUKU SHRIMP COMPANY, INC.	83-3550499
EARTH ALOHA EATS, LLC	84-1804626
EAST SIDE ASSOC. LLC	92-1425432
ENCHANTED LAKE HB, INC.	92-3364217
FAN'S ENTERPRISE, INC.	88-1129877
FAT PUB, LLC	84-3097197
FILLOS KAUAI, LLC	86-2840333
FINEST HAWAIIAN COFFEES, LLC	93-3542799
FISCHLER ENTERPRISES, LLC	26-3293536
FLYNN RESTAURANTS, LLC	33-1243201
FONG'S MEAT MARKET, INC.	47-1327119
FORC, LLC	85-3774429
FORMOSADELI, LLC	93-3215103
FUJI JAPANESE RESTAURANT, INC.	88-3527106
G&B MOLOKAI ENTERTAINMENT COMPANY, LLC	92-2515447
G&C FREITAS RANCH, INC.	99-0097047
GANESH DOSA, LLC	83-1549865
GECKO GIRLZ, LLC	83-2040869

GENJI, INC.	99-0218123
GOLDEN GOAT ENTERPRISES, LLC	87-2640675
GRS, LLC	92-375471
GUAVA SMOKED, LLC	27-3612666
H.S. NAM, LLC	85-3890928
H.W.A.T CO INC	93-1786894
HATSUHANAHAWAII, INC.	99-0213658
HAUMANA MAUI, LLC	83-4554996
HAVIK, LLC	84-4909568
HAWAIIAN ISLAND CAFÉ, LLC	46-4972910
HI DOTS, INC.	88-2187571
HILO TRADING CO, LTD.	99-0202410
HINSON INVESTMENT, INC.	84-2417003
HNL BURGER CO, LLC	27-2535182
HOMETOWN CANTEEN, LLC	85-3525430
HONGY, LLC	99-2633589
HONOKAA BROTHERS, LLC	01-0973919
HONOKAA PUBLIC HOUSE, LLC	83-3479156
HONOKOHAU L&L HB, INC.	46-1585641
HO'OKIPA PARTNERS, LLC	85-3602626
HOPPER MAUI, INC.	47-2397360
HOT POT HEAVEN, INC.	27-1012708
HSC HILO, LLC	27-5438498
INTEGRITY CHEM, LLC	26-3007906

IREH RESTAURANT, INC.	45-4246426
ISLAND VIBES CAFÉ, LLC	92-3346664
ISTANBUL RESTAURANT, INC.	81-3658318
JAMU, INC.	47-2607549
JCB DRY CLEANING, INC.	99-0324110
JH WANG, LLC	93-2993975
JIREH MEDIA, LLC	27-4122321
JJOY COMPANY, INC.	27-3744255
JNS THAI, LLC	82-1473093
JP FAMILY ENTERPRISES, INC.	20-1564180
JRS FOOD CORPORATION	92-1218771
JUCCI LUCCI F&B, LLC	83-1429670
K.K. RANCH, INC.	99-0163456
KAHAI STREET KITCHEN, LLC	71-0999120
KAHUA PALIMA, LLC	87-4456300
KAILUA BBQ, INC.	22-3870008
KARAI, LLC	84-2156508
KAUAI BREWERS, LLC	45-2982337
KAUAI ISLAND BREWING - KOLOA, LLC	86-1687010
KBAY HB, INC.	81-3420697
KDN ENTERPRISES, INC.	20-5882020
KOHALA VILLAGE HUB PUB & SHOP, LLC	47-5173469
KOHOLA-SKANA, LLC	87-3944273
KRUA THAI, LLC	26-2829319

K-TOWN FOODS, INC.	93-2310162
KULO, LLC	84-1963396
LA TOUR GROUP, LLC	27-1692523
LANTERNS RESTAURANT AND TAVERN, LLC	93-3306551
LAVA TUBE WAIKIKI, INC.	82-3761663
LEE AND CHEONG INVESTMENT, INC.	99-0355154
LIANG INVESTMENT, LLC	92-0989335
LILIHA DRIVE-INN, INC.	81-2897091
LIN FONG CORP	99-0346709
LOVERS+FIGHTING, INC.	38-4269788
M.I.K. USA, LLC	27-2920250
MARUHIRO, INC.	87-2583087
MEDITERRANEAN GOURMET FOOD, INC.	99-0165233
MEGRACE COMPANY, LLC	46-5769775
MEKIKO CANTINA, LLC	86-2935406
MIAN HONOLULU, LLC	82-4308266
MINASAH, LLC	87-1557134
MING DYNASTY FISH & SHRIMP CO INC.	20-2457471
MIYAKONJO HAWAII, LLC	83-0550686
MOUNTAIN MAGIC SHAVE ICE, LLC	83-2307958
MR OJISAN, INC.	99-0338098
MR TEA WARD, LLC	99-2567988
NANA AI KATSU, LLC	85-1994958
NAPUA HILO, LLC	93-1736052

NATSUNOYA TEA HOUSE, LLC	99-0118088
NEW CENTURY GROUP, LLC	84-4095193
NEW FIELD HONOLULU, INC.	94-3461204
NIU BAGUETTE BBQ & NOODLE SOUP, LLC	83-2235783
NORI BAR HONOLULU, LLC	88-2929915
NORTH SHORE PROVISIONS, LLC	20-5709541
OHANA FIVE STARS, INC.	88-3912360
ONE 38, INC.	81-3226586
ONE PLUS ONE, INC.	37-2147068
PACRIM MARKETING GROUP	99-0277752
PAESANO AT WAIMALU, LLC	26-0268111
PALATE KILAUEA, LLC	47-2033123
PARADISE POKE HAWAII, LLC	85-3604532
PATH FOOD CO., LTD	99-0302463
PHO TIME 2 CORP	84-2591947
PIETRO'S POIPU, LLC	83-2363354
PLATINUM PARTNERS, INC.	84-2393623
PLAY ENTERPRISE, LLC	83-0545025
POINT HB, LLC	85-1246166
PONO POTIONS, INC.	84-1820299
PONO RESTAURANT, LLC	37-1949515
PORTILLO SALES & MARKETING	47-4180824
POUNDERS RESTAURANT, LLC	99-2579333
QUEEN'S WAIKIKI LUAU, LLC	87-1639140

RAINBOW F&B, INC.	81-4886698
RAINBOW HEART, LLC	85-1590561
RANT DEVELOPMENT HOLDINGS, LLC	88-2321796
RESTAURANT EQUIPMENT HAWAII, LLC	81-3861074
RESTAURANT EQUIPMENT WHOLESALERS, INC.	20-0950080
RESTAURANT LIMA, LLC	87-3515948
ROMY'S KAHUKU PRAWNS & FISH, INC.	99-0345289
RUSINKO ENTERPRISES, LLC	20-5709541
RUYEE, LLC	27-1046019
RW RESTAURANT, LLC	92-1208850
SAGE CREAMERY, LLC	86-2518557
SAIMIN DOJO, INC.	82-3795521
SAKURA JAPANESE RESTAURANT, INC.	46-0659528
SANDWICH ISLE BREAD COMPANY, LLC	81-3802788
SANTA INTERNATIONAL, INC.	20-4235199
SEASONS TAIWANESE EATERY, LLC	92-0834546
SECOND WAVE PROVISIONS, LLC	92-2398323
SHIKEDA, LLP	84-4905088
SHOREFYRE, INC.	27-1484024
SI MING INVESTMENT, LLC	93-4524061
SOUTHERN ALOHA HOSPITALITY GROUP, LLC	82-3710856
SUGOI, LLC	99-0346997
SUPERB, INC.	94-3261045

T&T HOLDINGS, LLC	99-0414367
TAQUERIA EL RACHERO, LLC	47-2355908
TASTE TEA, INC.	45-4738701
TDM LEGACY, INC.	93-2724485
TEN SECONDS YUNNAN RICE NOODLE HI, LLC	88-3163223
TEPPANYAKI FARMER, LLC	81-3941759
THAI BISTRO CORPORATION	82-2093728
THOMAS NAYLOR, LLC	46-5361446
TIKEHAU LOUNGE, LLC	88-3637395
TIKI INIKI, LLC	46-0755916
TS GRASP, INC.	86-3314273
TWO PEAS, LLC	88-0625574
UNCLE D'S ENTERPRISES, LLC	47-2973116
UNITED PARTNERSHIP, LLC	47-0917096
UOTARO USA, INC.	38-4053061
V-LAND HOSPITALITY, LLC	99-4172597
VLIM, INC.	82-4387232
WAIAHOLE POI FACTORY, LLC	99-0156391
WAIKOLOA VILLAGE HB, INC.	88-1556537
WAILEA AGRICULTURAL GROUP, INC.	91-2173320
WANGCHANG CORPORATION	84-2371329
WAYLON WILDE, INC.	99-0757329
WAYNE K TAKUSHI	99-0344296
WINDWARD GRILL, INC.	26-0714264

WONJIN CORPORATION	45-2801307
WOODSIDE, LLC	47-1627253
WRANGLER'S STEAKHOUSE	99-0233584
XIAOYANZI, LLC	92-2174702
YODA, LLC	85-2813016
YOU KNOW THE DRILL, LLC	82-2738431