Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90135 012 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L55530

1. Corporation Name

BIG EASY CAJUN AT JACKSONVILLE, INC.

									AIRII AIRII IRBI
Principal Place of Business Mailing Address									
9501 ARLINGTON EXPY 7411 FULLERTON STREET									
SUITE 16-D		SUITE 204				DO NOT WRITE IN THIS SPACE			
JACKSONVILLE FL 32225 JACKSONVILLE FL 32256						3. Date Incorporated or Qualifed		BEAGE	
US		03				03/07/1990			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21		26				59-2997766		No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	_	\$8.75	
22		27				5. Certificate of Status Desired		Fee Re	equired
. City & State		City.& State				6: Election Campaign Financing		\$5:00	¹May Be—−
23		28			_	Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the cur	rent year Int	ang/ble	
24	. 25	25 29 30			_	Personal Property Tax.		☑ Yes	□No
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New	Registered	Agent	
				81	Name				
DRAUGHON, RICHARD S P.A.			}	82	32 Street Address (P.O. Box Number is Not Acceptable)				
200 WEST FORSYTH STREET				-	Street Addition	( .C. Dox Hamos is Hot Assept			
1	E 1730		ļ	83			_		
JACKSONVILLE FL 32202			-	84	City			85 Zip	Code
}					-		FL	•   ``     `	
office or re agent. I as	egistered agent, or both, in the Sta m familiar with, and accept the ob	ate of Florida. Such change was ligations of, Section 607.0505, Fl	authorized Iorida Statu	ites.	the corporation	oration submits this statement for the n's board of directors. I hereby acce	pt the appoi	ntment as re	gistered
	Signature, typed or printed name of registered			Agent	t signature required	when reinstating)  ADDITIONS/CHANGES TO OF		NO DIRECTO	70S IN 12
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	TIOLING AI	Change	Addition
TITLE	DVST	_ betere						عوالمالات ليبيا	7
NAME	YEN, KUNG-TI	#00E	1.2 NA						
STREET ADDRESS	10300 SOUTHSIDE BLVD., 1	<b>#300</b>			ADDRESS		タクし	256_	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CI		í-ZIP		غلمك	Change	X Addition
TITLE	DP	•		2.1 TITLE				□ Ondrigo	JEL IGGIOON
NAME	YEN, KUNG-PO		2.2 NA						
STREET ADDRESS	10300 SOUTHSIDE BLVD.,	#305	2.3 ST	REET	ADDRESS		20	1054	
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 Cf		T-ZIP		<u>0</u> '0	1256 Change	☐ Addition
TITLE		☐ DELETE	3 1 717		Ì			□ Cilalige	
NAME			32 NA	ME					
STREET ADDRESS			3.3 ST	REET	FADDRESS				ļ
CITY-ST-ZIP		<del>_</del>	3.4. CI		T-ZIP				Part of addition
TITLE		☐ DELETE	4,1 171	ΠE				Change	Addition
NAME			4.2 N	AME	1				
STREET ADDRESS			4.3 ST	REET	T ADDRESS				
CITY-ST-ZIP			4.4 Cl	TY-SI	Γ- ZIP				
TITLE		☐ DELETE	5.1 TIT					☐ Change	☐ Addition
NAME			5.2 NA					•	
STREET ADDRESS			5.3 ST	REET	ADDRESS				
CITY-ST-ZIP			5.4 CF		r-ZiP				
TITLE		☐ DELETE	6.1 TF	ΠE				☐ Change	☐ Addition
NAME			6.2 NA	ME					
1			63.ST	REET	TADORESS				

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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR