2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L55530 1. Entity Name BIG EASY CAJUN AT JACKSONVILLE, INC.					ceretary or state
9446 PHILL SUITE 8	ce of Business IPS HWY LE, FL 32256 US	Mailing Address 9446 PHILLIPS HWY. SUITE 8 JACKSONVILLE, FL 32256	US		1874 81500 81874 81877 81877 81877 81877 81878 819
	O NOT WRITE		CE	03142005 No Chg-P 4. FEI Number 59-2997766 5. Certificate of Status Desired	CR2E034 (10/03) Applied For Not Applicable
				DO NOT V IN THIS S	ana finistra di di Miliano di Liu
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature. Typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when renestating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIE YEN, KUNG-TI 9446 PHILIPS HWY # 8 JACKSONVILLE, FL 32256 DPS YEN, KUNG-PO 9446 PHILIPS HWY # 8	RECTORS		04/09/15	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACKSONVILLE, FL 32256			DO NOT V	VBITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. KUNG-PO YENAPR 4 2005					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Design Printed Name Of Signing OFFICER OR DIRECTOR					