

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90700 036 ***150.00

DOCUMENT # P00000042985

1. Entity Name

CAJUN CONNECTION OF TOWN CENTER, INC.



Principal Place of Business

11471 W. SAMPLE RD., #41
CORAL SPRINGS, FL 33065

Mailing Address

11471 W. SAMPLE RD., #41
CORAL SPRINGS, FL 33065

2. Principal Place of Business

11764 W. SAMPLE ROAD

Suite, Apt. #, etc.

#101

3. Mailing Address

11764 W. SAMPLE ROAD

Suite, Apt. #, etc.

#101



04212004

Chg-P

CR2E034 (10/03)

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-1004380

Applied For

Not Applicable

Zip

33065

Country

U.S.A.

Zip

33065

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAU, BONNIE Y
11471 W. SAMPLE RD., #41
CORAL SPRINGS, FL 33065

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

11764 W. SAMPLE ROAD, #101

City

CORAL SPRINGS

FL

Zip Code **33065**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **LAU, BONNIE Y**
STREET ADDRESS **Y**
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE **VP** ☐ Delete
NAME **LIU, CLETUS**
STREET ADDRESS **11471 W. SAMPLE RD., #41**
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11764 W. SAMPLE ROAD, #101**
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE ☒ Change ☐ Addition
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STREET ADDRESS **11764 W. SAMPLE ROAD, #101**
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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/04