P04000158791

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	1AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	1





100059930421

U9./28/0\$--01015--009 **35.00

OS SEP 28 PM 2: 30

10-4 10-4

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BOUDREAUX'S CAFE, INC. (Name of Corporation)
DOCUMENT NUMBER: P\$ 4\$\$\$ 158791
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KAREN E. HARRIS (Name of Contact Person)
BOUDREAUX 5 CAFE (Firm/Company)
15/1 N. WESTSHORE BLVD., #230 (Address)
TAMPA F 33607 (City/State and Zip Code)
For further information concerning this matter, please call:
KAVEN HARRIS at (813) 431-5516 (Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of 100000000000000000000000000000000000
1. The name of the corporation: BOUDREAUX'S CAFE, INC.
2. The principal office address: 5 N. UESTSHORE BUD. #230
TAMPA B 33/007
3. The mailing address (if different): (SAME)
5. The maining address (it direction).
4. Date of incorporation/qualification: 11 201004 Document number: POHOOD 15870
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
DONALD E MAYRAM TO
151 X WASSILVE BUILD STONE
TONION CONTRACTOR DUD., CHAIR OF SOL
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed):
1511 N 1115 CHOOC BUY C. 150 DZO
(P.O. Box NOT acceptable)
TAMPA, FZ 33607
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Koune Harris KARENE. HARRIS, V.P.
I hereby accept the appointment as registered agent and agree to act in this capacity.
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Howel Harris 9/20/05 (Signature of Registered Agent) 9/20/05
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *