


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000012881
 1. Entity Name
 CAJUN AND GRILL OF WESTLAND, INC.



Principal Place of Business Mailing Address
 4104 AURORA ST 4104 AURORA ST
 CORAL GABLES, FL 33146 US CORAL GABLES, FL 33146 US

DO NOT WRITE IN THIS SPACE



02032004 No Chg-P CR2E034 (10/03)
 4. FEI Number 65-0449091 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 YEUNG, HOI S
 4104 AURORA ST
 CORAL GABLES, FL 33146

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

U00000091082
 03/17/04-80045-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	YEUNG, HOI-SANG
STREET ADDRESS	4104 AURORA
CITY- ST- ZIP	CORAL GABLES, FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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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: HOI SANG YEUNG Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR