FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P93000024296 (4)

1. Corporation Name BIG EASY CAJUN - MASSACHUSETTS, INC. Principal Place of Business Mailing Address 800 BOYLSTON STREET PRUDENTIAL CENTER. STE 7 BOSTON MA 02199 JACKSONVILLE FL 32256							
U\$		US			3. Date Incorporated or Qualified 03/31/1993	3a. Date of Las 05/01	t Report 1/1995
Principal Place of Business		28. Mailing Address 26 7411 Fullerton Street		4. FEI Number 59-3174994		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable 75 Additional	
22		27 Suite 204		5. Certificate of Status Desired	1 1	e Required	
City & State		City & State		6. Election Campaign Financing		.00 May Be	
Zip	Country	Zip Zip	Country		Trust Fund Contribution	Ad	Ided to Fees
24	25	29 322570	30		8. This corporation has liability for i		rs 199.032,
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
			81	Narne			
DRAUGHON, RICHARD				Street Addre	ess (P.O. Box Number is Not Acceptab	le)	
200 WEST FORSYTH STREET SUITE 1730 JACKSONVILLE FL 32202							
			83				
JACK	SOMVILLE PL 32202		84	City		85	Zip Code
11 Pursuant t	o the provisions of Sections 607.0502	and 607 1509. Florida Statuta	n the above a			P-1_ i	
Or register	ou agont, or both, in the state of riond	a. Sugn change was authorize	s, the above-red by the corp	oration's board	tion subifiles this statement for the purpose of directors. I hereby accept the appo	pose of changing it bintmen: as register	is registered office red agent. I am
larimai wit	th, and accept the obligations of, Section	on 607.0505, Florida Statutes.				-	-
SIGNATURE _	Signature, typed or printed name of registered agent of	TCA) eldapicable (NOT	E: Registered Agen	I signature required	when reinstating	DATE	
12.	OFFICERS AND		13.	·	ADDITIONS/CHANGES TO OFFI		TORS IN 12
TITLE	DP VEN KUNO DO	☐ DELETE 1.1				☐ Chang	ge 🔲 Addition
NAME	YEN, KUNG-PO 200 W. FORSYTH ST., SUIT	T 4700	1.2 NAME				
INCKCONTRILLE EL		E 1/30	1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	ST DELETE		1.4 CITY - ST - ZIP				
NAME	YEN, KUNG-TI	Doctete	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS			☐ Chang	ge 🔲 Addition
STREET ADDRESS	200 W. FORSYTH ST., STE	1730					
CITY-ST-ZIP JACKSONVILLE FL			2.4 CITY-ST-ZIP				
TITLE		DELETE	3 1 TITLE			Chang	e [1] Addition
NAME			3.2 NAME			<u>.</u>	
STREET ADDRESS			3.3. STREET	ADDRESS			
CITY-ST-ZIP			3.4 C(TY-S	r-ZIP			
TITLE	☐ DELETE 4.		4. 1 TITLE			☐ Chang	e Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET	1			
CITY-ST-ZIP TITLE		E3 56:636		I - ZIP		<u> </u>	
NAME		L DELETE	5. 1 TITLE 5.2 NAME			Change	e 🔲 Addition
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.3 STREET				
TITLE		☐ DELETE	6 1 TITLE			Change	e Addition
NAME	_		62 NAME				
STREET ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP			6.4 D(TY-S)	- Z IP			
oath: that I	certify that the information supplied w the information indicated on this annua am an officer or director of the corpor Block 12 or Block 13 if changed, or or	il report or supplemental annu-	al report is true	a and accurate	and that my cianature chall have the c	aanaa la zal affaat aa	المصممات

SIGNATURE: KUNG-Po Yen 3/15/96 (904)363-0366