FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300061100 1. Corporation Name

CAJUN AND GRILL OF CUTLER RIDGE MALL, INC.

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90228 028 ***150.00



Principal Plac	e of Business	Mailin	ng Address	_			1 101	111891 110 10108	******	(1 68) 11 68 11 9			
1 987 71 S T 1957 71 ST													
MI AMI BEACH FL 33141			MIAMI BEACH FL 33141 US				DO NOT WRITE IN THIS SPACE						
US					3. Date Incorporated or Qualified						7		
							08/31/	1993	Qualifed				_
2. Principal P	Place of Business	·	ailing Address	~			4. FEI Num				A	polied For	4
21 CAJU1	NARKILL OF C	UTERRIXED C	<u>DUNUTH</u>	KILL			<u>65-047</u>	<u> 5992 </u>			N	lo Applicable	4
Suite, Apt. #, etc. 22 MAL Stove # 1879 27 20505 S. D.					2 HW		5. Certifcat	e of Status	Desired			Additional le juired	
City & State City & State						7	6. Election	 Campaign F	inancing		\$5.00	I ≀/lay Be	1
23 20505 S. DIXICHWY 28 MIAM							Trust ⊞u	nd Contribu	tion	<u> </u>	Added	to Fees	
Zip Country Zip					ntry		8. This corp	ooration owe	es the curre	ent year Int	angible		
24 MIA	M1 25 33	29 3	33187	30 \	<u> 30AC</u>			Property T			Yes	XNo	4
		s of Current Register	ed Agent				10. Name a	nd Address	of New R	egistered	Agent		4
YEU	ING, HOI S				81 Name	$\sqrt{2C}$	<u> </u>	72-0114	B -				
1957 71ST STREET					82 Street	Aldres	s (P.O. Bo) 1	lumber is N	ot Acceptal	\$ ^{le)} 6/	ACE		Ì
MIAMI BEACH FL 33141					83	5.2.1	<u> </u>			7 - 1 -	410-		1
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					84 City	M	IM AI			FL	. 33	5 5 7	
11. Pursuant	to the provisions of Secti	ons 607.0502 and 607.	1508, Florida Stati	tes, the al	ove-named	corpora	ation submits	this stateme	ent for the p	ourpose of	changing it	s registered	
office or i	registered agent, or both, am familiar with, and acce	in the State of Florida. pt the obligations of, Se	Such change was ection 607.0505, F	autnorized Iorida Statu	tex	Of HIOTI	s board or ill	1	reby accep-	(the appoi	nument as i	et istered	
-	-T-11/1	LEUN &	(DRECIE	V=475	\(\mathcal{J}\)	7		. /0		X	412	0199	
SIGNATUFE	Signature, typed or printed or me		plicable. (NO	E Registered	Agent signature r	re (Hr d W	hen reinstating)			DATE	-11-		
12.	OF	FICERS AND DIRECT		13.		/	CITIDDA	S/CHANG	ES TO OFF	IČERS AN			1
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	1					1							- 1

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made or derived 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 12 or Block 13 if changed, or on an attach ment with an address, with all other like empowered.

SIGNATURE &

TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR