FILED 2000 UNIFORM BUSINESS REPORT (UBR) Jan 18, 2000 8:00 am Secretary of State DOCUMENT # **P95000016700** BIG EASY CAJUN - CHICAGO, INC. 01-18-2000 90154 016 ***150.00 Mailing Address Principal Place of Business 7411 FULLERTON STREET "TOS OLD ORCHARD CTR. 701685 SUITE 204 STUDBLE IL 60077 JACKSONVILLE FL 32256-3629 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3297983 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Kung-Po Yen -7411-Fullerton-St-,-Ste.-204 DRAUGHON, RICHARD S Jacksonville, FL 32256 200 W FORSYTH ST **SUITE 1730** JACKSONVILLE FL 32202 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 KUNG-PO YEN PRESIDENT SIGNATURE (NOTE: Registered Agent signature required when reinstating) nt and title if applicable. Signature, typed or printed name of FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. ☐ Change Addition TITLE Delete TITLE YEN, KUNG-PO NAME NAME STREET ADDRESS 10300 SOUTHSIDE BLVD., #305 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Change Addition DVST Defete TITLE TITLE YEN. KUNG-TI NAME NAME STREET ADDRESS 10300 SOUTHSIDE BLVD., #305 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32256 CITY-ST-ZIP Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-7IE ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P

13. 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 11 or Block 12 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

KUNG-PO YEN PRESIDENT

Violoo

904-363-0366

Daytime Phone #