


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007 8:00 am
Secretary of State

04-06-2007 90036 050 ***150.00

DOCUMENT # P95000016705

1. Entity Name
BIG EASY CAJUN - ANNAPOLIS, INC.



Principal Place of Business Mailing Address

9446 PHILIPS HWY 9446 PHILIPS HWY
 SUITE 8 SUITE 8
 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

10175 Fortune Pkwy, Ste 705
 Jacksonville FL 32256-6753

10175 Fortune Pkwy, Ste 705
 Jacksonville FL 32256-6753

Zip Country Zip Country

40032000



03192007 Chg-P CR2E034 (12/06)

4. FEI Number Applied For

59-3297980 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DRAUGHON, SCOTT R
 9446 PHILLIPS HWY #8
 JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

10175 Fortune Pkwy, Ste 705
 Jacksonville FL 32256-6753

FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPS	<input type="checkbox"/> Delete
NAME	YEN, KUNG-PO	
STREET ADDRESS	9446 PHILIPS HWY # 8	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	DTV	<input type="checkbox"/> Delete
NAME	YEN, KUNG TI	
STREET ADDRESS	9446 PHILIPS HWY #8	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10175 Fortune Pkwy, Ste 705	
STREET ADDRESS	Jacksonville FL 32256-6753	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10175 Fortune Pkwy, Ste 705	
STREET ADDRESS	Jacksonville FL 32256-6753	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: KUNG-PO YEN **04/07** **9042605571**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #