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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 29 1997 8:00am

Secretary of State

DOCUMENT # P95000054184 (3)

CAJUN & GRILL OF SANTA MONICA, INC

Principal Place of Business Mailing Address										
										i e i e i e i e i e i e i e i e i e i e i
1957 71ST ST. MIAMI BEACH I	FL 3 3141		1957 71ST ST. MIAMI BEACH FL	1957 71ST ST. MIAMI BEACH FL 33141-4415						
							 Date Incorporated or Qualified 07/10/1995 	3a. Date - 05/01/		eport
2. Principal Pl	ac e o f Busin	iess	2a. Mailing Addr	oss			4, FEI Number		Ar	oplied For
21			26			95-4543549			ot Applicable	
Suite, Apt. :	#, etc.		Suite, Apt #,	Suite, Apt #, etc.			5. Certificate of Status Desired			Additional equired
City & State			City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23			28	28			Trust Fund Contribution		Added	
Zip		Country	Zip	Country			8. This corporation has liability for in			199.032
24		25	29	30				Yes 1		
			rent Registered Agent		-	1	10. Name and Address of New Reg	istered Age	ant	
	ng, hoi s			81 Name						
1957 71ST ST.				82 Stree			dress (P.O. Box Number is Not Acceptabl	e)		
MIAN	MI BEACH	FL 33141			83	<u> </u>				
					84	City			0E 710	Code
					04	City		FL!	85 Zip (Joue
office or re	egistered ag	ent, or both, in the St	0502 and 607.1508, Floridate of Floridate Such charalligations of, Section 607.	ige was authorize	d by	y the corpo	orporation submits this statement for the puration's board of directors. I hereby accept	rpose of ch t the appoin	anging it Imont as	is registered registered
SIGNATURE										
	Signature typed	or presed harve of registered				ent signature re-	quired when reinstating)	DATE	UDEDTO!	
12,	D	OFFICERS /	AND DIRECTORS	13 111 117			ADDITIONS/CHANGES TO OFFIC		Change	Addition
TITLE	_	HOI CAMO) νι					_) Grange	☐ Vogition
NAME	1957 718	HOI SANG			IAME					
STREET ADDRESS		ACH FL 33141				I ADDRESS				
CITY-ST-ZIP	MINIMI DE	AUT FL 33141				S1 - ZIP		_	Change	Addition
TITLE			L_ 1/1		IAME			-) Orlango	Addiesii
NAME STREET ADDRESS						I ADDRESS				
				1		ST-ZIP				
CITY-ST-ZIP TITLE			Di			51-21		-	Change	Addition
NAME				321				_	,	
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP						ST-ZIP				
TITLE			□ DE			51-711			Change	Addition
NAME					NAME					-
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP						ST-ZIP				
TITLE			DI						Change	☐ Addition
NAME					IAME					
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP						\$1-7IP				
TITLE			DI						Change	Addition
NAME				621	IAME					
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP						S1-ZIP				

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

14. I do hereby certify that the information supplied with this bring 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 under eath; that I am an officer or director of the corporation or the receiver of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name