

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

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90177 021 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000066040**  
 1. Corporation Name  
**CAJUN & GRILL OF LAS AMERICA, INC.**



Principal Place of Business 1957 71 S MIAMI BEACH FL 33141	Mailing Address <del>1957 71 ST</del> <del>MIAMI BEACH FL 33141</del>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>4104 AURORA ST,</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>4104 AURORA ST,</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>08/24/1995</b>	
22 City & State 23 <b>CORAL GABLES, FL</b>		27 City & State 28 <b>CORAL GABLES FL</b>		4. FEI Number <b>66-0525514</b>	
24 <b>33146</b> 25 <b>USA</b>		29 <b>33146</b> 30 <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
9. Name and Address of Current Registered Agent <b>YEUNG, HOI S</b> <b>1957 71 ST</b> <b>MIAMI BEACH FL 33141</b>		81 Name		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
		82 Street Address (P.O. Box Number is Not Acceptable) <b>4104 AURORA ST,</b>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		83		10. Name and Address of New Registered Agent	
		84 City <b>CORAL GABLES</b> <b>FL</b>		85 Zip Code <b>33146</b>	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>4104 AURORA ST,</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>YEUNG, HOI S</b>		1.2 NAME	
STREET ADDRESS <b>1957 71 ST</b>		1.3 STREET ADDRESS <b>CORAL GABLES, FL 33146</b>	
CITY-ST-ZIP <b>MIAMI BEACH FL 33141</b>		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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 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 12 or Block 13 if changed or on an attachment with an address, with a different like empowered.

SIGNATURE: *Ho Sang Yeung* Date: 4/15/99 Daytime Phone #: 305-476-1611

CR2E034 (11/98)