2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2008 8:00 am Secretary of State

DOCUMENT # P9600050888 1. Entity Name BIG EASY CAJUN - TUTTLE CROSSING, INC.							08 90022 0	46 ***15	50.00
Principal Place of Business Mailing Address					⊣ 4 00'	57900			
10175 FORTUNE PKWY SUITE 705 JACKSONVILLE, FL 32256		10175 FORTUNE PKWY SUITE 705 JACKSONVILLE, FL 32256		705					
A D: : (D)		To Marie And							
2. Principal Pi	ace of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02222008	Chg-P	CR2E03	4 (12/06)	
City & State		City & State			4. FEI Number 59-339			h	plied For t Applicable
Zip	Country	Zip	Coun	itry	5. Certificate	of Status Desired		8.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New	Registered A	gent	
YEN, KUNG PO				Name					
944 PHILIPS HWY #8 JACKSONVILLE, FL 32256			Street Addres	s (P.O. Box Number FORTUNE	er is Not Acceptab	sie) Suite	705		
			City	·····		FL	Zip Code	······	
The above named entity submits this statement for the purpose of changing its registere					tered agent, or bo	th, in the State of F		miliar with.	and accept
	ons of registered agent.							·	·
SIGNATURE.	Signature, typed or printed name of registered agent	and title # applicable. (NO	TE: Registere	d Agent signature requ	ired when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution.					5.00 May Be dded to Fees	- –			
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE			TITL			***************************************		☐ Change	☐ Addition
NAME	YEN, KUNG-PO								
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS (-S1-ZIP					
TITLE	DTV Delete TITL			E				☐ Change	Addition
NAME	YEN, KUNG-TI			IE					
STREET ADDRESS				EET ADDRESS ST-ZIP					
CITY-ST-ZIP	JACKSONVILLE, FL 32256	ET 5 7						☐ Change	Addition
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STREET ADORESS			a.	EET ADDRESS					
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NAME			NAK	1					
STREET ADDRESS CITY- ST-ZIP				EET ADDRESS /-ST-ZIP					
TITLE		☐ Delete	TITL					☐ Change	Addition
NAME			NAN	AE				-	
STREET ADDRESS			8	EET ADDRESS					
CITY-ST-ZIP			CITY	(-ST-ZIP		0.51-1-01-1-1	I further cost	h, that the in	-fmation

12. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KUNG-PO YEN

3/24/08

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