

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000061108 (2)**

1. Corporation Name
BAYOU GRILLE, INC.

Principal Place of Business
**3101 PGA BLVD.
#207
PALM BEACH GARDENS FL 33410**

Mailing Address
**3101 PGA BLVD.
#207
PALM BEACH GARDENS FL 33410**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/19/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0760722	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**SAENGSIKWRASATHIEN, CHUCHUEN
3101 PGA BLVD.
#207
PALM BEACH GARDENS FL 33410**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

Signature, typed for printed name of registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

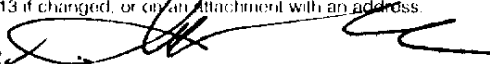
OFFICERS AND DIRECTORS

12.	TITLE	PSD	<input type="checkbox"/> DELETE
	NAME	SAENGSIKWRASATHIEN, CHUCHUEN	
	STREET ADDRESS	3101 PGA BLVD. #207	
	CITY- ST- ZIP	PALM BEACH GARDENS FL 33410	
	TITLE	VTD	<input type="checkbox"/> DELETE
	NAME	KONGKITKUL, NITHIMA	
	STREET ADDRESS	3101 PGA BLVD. #207	
	CITY- ST- ZIP	PALM BEACH GARDENS FL 33410	
	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		

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2	NAME	
1.3	STREET ADDRESS	
1.4	CITY- ST- ZIP	
2.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2	NAME	
2.3	STREET ADDRESS	
2.4	CITY- ST- ZIP	
3.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2	NAME	
3.3	STREET ADDRESS	
3.4	CITY- ST- ZIP	
4.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2	NAME	
4.3	STREET ADDRESS	
4.4	CITY- ST- ZIP	
5.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2	NAME	
5.3	STREET ADDRESS	
5.4	CITY- ST- ZIP	
6.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2	NAME	
6.3	STREET ADDRESS	
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 119.07(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 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.

SIGNATURE:



2/28/98

(561) 6244088

CR2E034 (10/97)