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

29

9. Name and Address of Current Registered Agent

PROFIT CORPORATION ANNUAL REPORT

1998

HOI SANG YEUNG **1957 71ST STREET** 

MIAMI BEACH FL 33141

24



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600069807 (1)

CAJUN & GRILL OF CLACKAMAS TOWN CENTER, INC.

Principal Place of Business Mailing Address 1957 71ST STREET 1957 71ST STREET MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 43-1222705 21 Suite, Apt #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zıp Country 8. This corporation owes or has paid the current year Intangible

84 City Zip Code 11. Pursuant to the provisions of Sections 607 (E62 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

81 Name

**B2** 

83

SIGNATURE Stonature, typied or protect name of requirement agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1 1 1/I/F TITLE HOI SANG YEUNG 1.2 NAME NAME 1957 71ST STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33141 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2 1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 117LF TITLE 3 2 NAME NAME STREET ADORESS 3.3 STREET ADDRESS 3 4 CITY-ST-ZIP CITY - ST - ZIP DELFTE Addition Change TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Change Addition 5 1 THLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - 2IP CITY - ST - ZIP TITLE DELETE 6.1 11116 Change ☐ Addition NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS

64 CITY - ST - ZIP 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 eath; 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:

FILED

May 15 1998 8:00am

Secretary of State

Personal Property Tax due June 30.

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

10. Name and Address of New Registered Agent

Applied For

Fee Required

∏ No

Yes

Not Applicable