## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 03, 2008 08:00 Al Secretary of State

	ANNUAL	Apr 03, 2008 08:0					
1. Entity Nam	MENT # P97000022 T CAJUN MANAGEMENT CO		<b></b>		Secreta	ary of St	
10175 FORT SUITE 705		Mailing Address 10175 FORTUNE PKWY SUITE 705 JACKSONVILLE, FL 32256	US			: 88)))	40081       881       <u> </u>
				02222008	No Chg-P	CR2E034 (1	
D	O NOT WRITE	N THIS SPA	CE	4. FEI Number 59-34206			Applied For Not Applicable
		erikikisi ele	/www.c.ajj	5. Certificate of	Status Desired		75 Additional Required
	6. Name and Address of Current Reg	istered Agent	La di tur Ligisus, iras	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in the same of	No. 18 aby 11, 154	
YEN, KUNG-PO 9446 PHILIPS HWY # 8 JACKSONVILLE, FL 32256					IOT W HIS SP		
	e named entity submits this statement for the tions of registered agent Signature, typed or printed name of registered agent and to		red office or register ed Agont signature required	-		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Final     Trust Fund Contribution.		.00' May Bé ed to Fees	U0000 04/14/08	)0878796 - 3-80071-0	07 150.00
10.	OFFICERS AND DIR	ECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS KUNG-PO YEN 10175 FRORTUNE PKWY SUITE 70 JACKSONVILLE, FL 32256	)5					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTV YEN, KUNG-TI 10175 FORTUNE PKWY SUITE 705 JACKSONVILLE, FL 32256	i					
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO N	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SP	ACE	
TITLE NAME STREET ADDRESS							

12. Thereby certify that the information supplied with this filing 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:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DRINGS SIDE NT

KUNG-PO YEN

3/28/08

904 2605571