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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000033694

1. Corpo ation Name

KELLY'S CAJUN GRILL OF CORAL GABLES, INC.

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

04-29-1999 90177 019 ***150.00



Principal Place of Business Mailing A	Address		אומש נונעת ונסטו ונועל שור וסקונשתיו	נוסר בעום נונסר שננום שלוור שמזור ששוטם וווקם ב
957 71ST ST 1957 71ST ST 418MI BEACH FL 33141 MIAMI BEACH FL 33141				
			DO NOT WRIT	E IN THIS SPACE
			3. Date Incorporated or Qualifed 04/14/1997	
2. Principal Place of Business 2 2a. Mailir	ng Address		4. FEI Number	Applied For
27 41)4 AURARA ST, 26 410	34 HUROR	A ST,	65-0742966	Nct Applicable
Strite, /vpt. #, etc. Suite	Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2227			5. Certificate of Status Desired	Fee Required
City & State 23 ORAL GABLES FL 28 COK	State ALGABUS	ES EL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip 25 (1 S A 29 33)	146 30	ountry USA	This corporation owes the curre Personal Property Tax.	☐ Yes ☐ No
9. Name and Address of Current Registered	Agent		10. Name and Address of New Re	egistered Agent
YEUNG, HOI S		81 Name		
4957 71ST-ST MIAMI-BEACH-FL 33141		82 Street Aldre	ss JR.O. Bo. Number is Not Acceptat	ole)
		4104	HURORA SI,	
MICHIEL TOTT I C 33141		83		
		84 City		85 . Zip Code, /
		CORA	(GHBLES	FL 33/46
 Pursuant to the provisions of Sections 607.050? and 607.150 office or registered agent, or both, in the State of Florida. Sur agent. I am familiar with, and accept the obligations of, Section 	ch change was authorize	ed by the corporation	ration submits this statement for the pairs board of directors. I hereby accept	burpose of changing its registered the appointment as registered
SIGNATURE				
Signature, typed or printed name of registered agent and title if applica		ed Agent signature required		DATE
12. OFFICERS AND DIRECTOR			ADDITIONS/CHANGES TO OFF	
TITLE D		TITLE //	104 AURORA DRAL GABLES,	ST. Grange DAddition
NAME YEUNG, HOIS		NAME C	201 600125	F1 32/11/
STREET ADDRESS 4957-718T ST		STREET ADDRESS 2	DRAL GABLES,	1637776
CITY-ST-ZIP MIAMI-BEACH FL 33141		CITY-ST-ZIP TITLE		Change Addition
TITLE]		C svenda C vernan
NAME		NAME ATREET ADDRESS		
STREET ADDRE 3S		STREET ADDRESS		
CITY-ST-ZIP TITLE		CITY-ST-ZIP TITLE		Change Addition
NAME		NAME		
STREET ADDRESS	I	STREET ADDRESS		
		CITY-ST-ZIP		
CITY-ST-ZIP TITLE		TITLE		7 01 - F A2291-
NAME				☐ Change ☐ Addition
STREET ADDRESS	4.2	NAME		Change D Addition
	I	NAME STREET ADDRESS		Change Daddillon
	4.3 8	STREET ADDRESS		{_ Change Addition
CITY-ST-ZIP	4.3 8	STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE	4.3.8 4.4.0 DELETE 5.11	STREET ADDRESS		
CITY-ST-ZIP TITLE NAME	4.3.8	STREET ADDRESS CITY-ST-ZIP TITLE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS	4.38 4.44 DELETE 5.11 5.20 5.38	STREET ADDRESS CITY-ST-ZIP TITLE NAME		
CITY-ST-ZIP TITLE NAME STREET ADDRES S CITY-ST-ZIP	4.38 4.44 DELETE 5.11 5.24 5.35 5.46	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		
CITY-ST-ZIP TITLE NAME STREET ADDRES S CITY-ST-ZIP TITLE	4.38 4.44 DELETE 5.11 5.24 5.38 5.46 DELETE 6.11	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRES S CITY-ST-ZIP	4.38 4.44 5.11 5.21 5.35 5.46 DELETE 6.11 6.21	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ Change ☐ Addition

14. Thereby 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 cc rtify that the information indicated on this annual report or supplemental a inual 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 appeals in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ING OFFICER OR DIRECTOR