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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000089512

1. Corporation Name

BIG EASY CAJUN - DOWNTOWN ATLANTA, INC.

DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32222 LS JACKSONVILLE FL 32222 LS JACKSONVILLE FL 32222 LS JACKSONVILLE FL 32222 LS JACKSONVILLE FL 32225 LS JACKSONVILLE FL 32222 LS JACKSONVILLE FL 32223 LS JACKSONVILLE FL 32225 LS JACKSONVILLE FL 32225 J									
AGKSON/ILE FL 32222 AGKSON/ILE FL 32228 LS	Principal Place	of Business	Mailing Address						
JACKSONVILLE FL 32222 JACKSONVILLE FL 32232 JACKSONVILLE FL 322324 JACKSONVILLE	200 WEST FORS	SYTH STREET	7411 FULLERTON ST						
US 2. Principal Place of Business 2. A Mailing Address 2. A Mailing Address 3. Date Incorporated or Qualified 10/11/1/1997 4. FEI Number 5. Sulfa, Apt. #, etc. 2. City & State 2. City			— - -				DO NOT WRITE IN THIS SPACE		
Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For	JACKSONVILLE FL 32202		7.27						
2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For Not Applicable 268 Not Applicable			•			İ	10/17/1997		
Suite, Apt. #, efc. Suite, Apt. #, efc.	2. Principal Pl	ace of Business	2a. Mailing Address	******			4. FEI Number	Ap	plied For
Suite Apt #, etc. Suit	21		26				59-3480223		
27 City & State City & Cit			Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		
Zip Country Zip Country Zip Country R. This corporation owes the current year intangible Personal Property Tax Under Und	22								
Zip							T - ' 1		
29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and New Registered Registered 10. Name and New Registered Registered 10. Name and New Registered Registered 10. Name and New Registered Re		O							o rees
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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, with all other like empowered.

SIGNATURE:

GNING OFFICER OR DIRECTOR