

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90261 046 ***150.00

DOCUMENT # P97000094993

1. Entity Name
BIG EASY CAJUN - SAN ANTONIO, INC.

| | |
|--|--|
| Principal Place of Business 9446 PHILLIPS HWY. SUITE 8 JACKSONVILLE FL 32256 US | Mailing Address 9446 PHILLIPS HWY. SUITE 8 JACKSONVILLE FL 32256 US |
|--|--|



DO NOT WRITE IN THIS SPACE

| | | | | |
|---|---|--|---|--|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. | 4. FEI Number 59-3487920 | Applied For <input type="checkbox"/> | Not Applicable <input type="checkbox"/> |
| City & State | City & State | 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required | |
| Zip | Country | Zip | Country | |

| | | | |
|--|--|---|----------|
| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent | | |
| YEN, KUNG P 7411 FULLERTON STREET SUITE 204 JACKSONVILLE FL 32256 | Name | Street Address (P.O. Box Number is Not Acceptable) 9446 Philips Hwy # 8 | |
| | City | FL | Zip Code |

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE 1/16/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP KUNG-PO YEN 7411 FULLERTON ST SUITE 204 JACKSONVILLE FL 32256 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 9446 Philips Hwy # 8 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVPS KING-T, YEN 7411 FULLERTON ST SUITE 204 JACKSONVILLE FL 32256 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 9446 Philips Hwy # 8 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **KUNG-PO YEN** 1/16/01 904-260-5571
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT Date Daytime Phone #

CR2E034 (10/00)