2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED ON

SIGNATURE:

Apr 06, 2007 8:00 am Secretary of State 04-06-2007 90036 006 ***150.00 DOCUMENT # P97000094993 BIG EASY CAJUN - SAN ANTONIO, INC. 40052021 Principal Place of Business Mailing Address 9446 PHILLIPS HWY. 9446 PHILLIPS HWY. SUIYTE 8 SUIYTE 8 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address ---- Ant # oto 03192007 Chg-P CR2E034 (12/06) 10175 Fortune Pkwy, Ste 705 10175 Fortune Pkwy, Ste 705 Jacksonville FL 32256-6753 Jacksonville FL 32256-6753 4. FEI Number Applied For 59-3487920 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YEN, KUNG P 9446 PHILIPS HWY #8 Street Address (P.O. Box Number is Not Acceptable) SUITE 204 10175 Fortune Pkwy, Ste 705 JACKSONVILLE, FL 32256 Jacksonville FL 32256-6753 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPS TITLE Addition ☐ Delete TITLE Change NAME KUNG-PO YEN NAME 10175 Fortune Pkwy, Ste 705 STREET ADDRESS 9446 PHILIPS HWY #8 STREET ADDRESS Jacksonville FL 32256-6753 JACKSONVILLE, FL 32256 CITY-ST-ZIP CITY-ST-ZIP DTV THLE Delete TITLE Change ☐ Addition KING-T, YEN NAME 10175 Fortune Pkwy, Ste 705 9446 PHILIPS HWY #8 STREET ADDRESS STREET ADDRESS Jacksonville FL 32256-6753 CITY-ST-ZIP JACKSONVILLE, FL 32256 CITY-ST-ZIP TITLE ☐ Addition Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-2IP TITLE Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THTLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby 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

KUNG-PO YEN

OF SIGNING OFFICER OR DI

FILED