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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S48950** 

(7)

BIG EASY CAJUN AT TAMPA BAY, INC.

## **FILED** Feb 17 1998 8:00am Secretary of State



Principal Place	e of Business	Maile	Mailing Address									
3302 W. DR. SUITE 3012	MARTIN LUTHER KING. JR. BLVD.	741 SU	7411 FULLERTON STREET SUITE 204									
TAMPA FL 33607			JACKSONVILLE FL 32256 US					DO NOT WRITE IN THIS SPACE				
							04/30/					
<u>-</u>	lace of Business	2a. N	lailing Address	· ·			4. FEI Numb	9r			Applied For	
21			26				59-30	82566			Not Applicat	ole
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5 Certificate	of Status Desired			Additional	
22	····	27					S. Cormicato	Or Olaios Desired	LJ	Fee I	Required	
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24	25]	29	red Agent	30	<b></b> -	<del></del>		roperty Tax due June			Ll No	_
9. Name and Address of Current Registered Agent						Nam	<del></del>	Address of New Re	Aistoleo	võeur		
DRAUGHON, RICHARD S 200 W. FORSYTY ST - STE 1730					81	14011						
1						Stree	et Address (P.O. Box Nu	mber is Not Acceptat	ole)			$\neg$
JA	CKSONVILLE FL 32202				83			<del></del> .				_
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1					84	City			g a	85 Zip	Code	$\dashv$
11 Personal I	to the provisions of Castiana 507 or	2 204 663	11.00 Florido Dr-4	ton the			al agrandis 4 - 5 - 7				h	
office or re	to the provisions of Sections 607 050 ogistered agent, or both, in the State in familiar with, and accept the oblig	ız and ⊌07 ⊧of Florida	. roug, Florida Statu Such change was	nes, the a authoriza	above ad by	-name the co	orporation submits the corporation's board of dire	nis statement for the p ectors. I hereby accer	ourpose o	t changing pointment a	ns registere is registered	/a
agent. La	m familiar with, and accept the oblig	ations of, S	Section 607.0505, F	lorida Sta	atutes	3,		,,				
SIGNATURE	Signature typed or printed trainse of registered age	nur acut situ	ranke abble	If De-i-	ad 6 -		ure required when reinstating)		DATE			_
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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.

SIGNATURE:

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