2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2004 08:00 AM Secretary of State

DOCUMENT # V24691 1. Entity Name CAJUN AND GRILL OF PEMBROKE LAKES, INC.							Secretary of State				
Principal Place of Business Mailing Address											
11401 PINE BLVD 496				4104 AURORA ST CORAL GABLES, FL 33	US						
PEMBROKE	PINES, FL 3	33026 US									
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			02032004	Chg-P	CR2E00	34 (10/03)	, .
City & State				City & State		4. FEI Number 65-0325			_	pplied For of Applicable	
Zip	Zip Country			Zip	Cour	stry	Sertificate of Status Desired Sertificate of Status Desired Fee Required Fee Required			ditional	
6. Name and Address of Current			Regi	stered Agent	l		7. Name and A	ddress of New R			90
						Name					
YEUNG, HOI SANG 4104 AURORA ST						Street Address (P.O. Box Number is Not Acceptable)					
CORAL GABLES, FL 33146											
			City			FL	Zip Coo	le			
B. 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 the obligations of registered agent.										amiliar with.	and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent algusture required when reinstating) DATE											
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution.											
10.	PD	OFFICERS AND	DIRE		11.	-	ADDITIONS/C	HANGES TO ÖFF	CERS AND		
TRILE NAME	YEUNG, HOI SANG			☐ Delete	TITEL	1		HESSAG		☐ Change	Addition
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TITLE	CORAL GABLES, FL 33146					-ST-ZIP				Change	☐ Addition
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CITY-ST-ZIP		····.		77	+	ST-ZIP					
TITLE NAME				☐ Delete	TITLE NAME					☐ Change	☐ Addition
STREET ADDRESS						ET ADDRESS					
12. hereby c	ertify that the	Information sugnitied with	this f	ling does not qualify for		ST-ZIP motion stated in Se	ction 119.07/3VA	Florida Statutes 1	further certi	fy finat tine is	oformation
12. I hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Liurther 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 changed, or on an attachment with an address, with all other like empowered.											