FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

V33151 **DOCUMENT #**

May 01 1996 8:00 am Secretary of State

FILED

CAJUN & GRILL OF HAWTHORN CENTER, INC.

Principal Place of Business ----

Mailing Address

SOLO DEALDIE AVENUE

MIAMI BEACH		MIAMI BEACH FL 33139			
				3. Date Incorporated or Qualified 04/29/1992	3a. Date of Last Report 05/01/1995
2. Principal Plac	ce of Business	2a. Mailing Address	·····	4. FEI Number	Applied For
21 1957	71st STREET	26 (937 70	" STRZZT	36-3834716	Not Applicable
Suite, Apt. #.	, etc.	Suite, Apt. #, etc.	'	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	(BEACH, FLORIDA	Oity & State 9 28 MIAMI BZACE	7LOR DA	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33 (4	Country	Zip 29 33141 30	Country	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s 199.032,
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New R	egistered Agent
			B1 Name		ļ
			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
	AIRIE AVE.		195	7 7/ " S/REET	
MIAMI BE	EACH FL 33139		SS TOTAL	,	
			84 City	2-2-1-	85 Zip Code
44 Duramont to	the provisions of Sections 607 0502	and 607 1609 Florida Statutos th	AA) M	1 BEHCLT oration submits this statement for the pur	mose of changing its registered office
or registere	d agent, or both, in the State of Floric , and accept the obligations of, Section	fa. Such change was authorized b	y the corporation's boa	ard of directors. I hereby accept the appoint	page of changing its registered office of the changing its registered agent. I am
SIGNATURE.	Signature, typed or printed name of requiterest agent	and trin it applicable (NOTE: Pa	cgisterea Agent signature require	ec when reinstahing!	£ATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TOLE		Change Addition
NAME	YEUNG, HOI SANG		1.2 NAME	04	
STREET ADDRESS	2010 PRAIRIE AVE.		13 STREET ADDRESS	957 71 STREET LIAMI BEACH, F	
CITY-ST-ZIP	MIAMI BCH. FL		14 CITY-ST-ZIP	LIAMI BRACH T	L 33141
TITLE	D	□ DELETE	2 1 THILE		Change Addition
NAME	Quai, S. Yeung		2.2 NAME		
STREET ADDRESS	8362 PINES BLVD., SUITE 29	2	2.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL	114 y 114 114 114 114 114 114 114 114 11	2 4 CITY+ ST-ZIP		
TITLE		☐ DELETE	3. 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-7IP			3.4 CHY-S1-ZIP	, ,	Page 1
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		FT OF CT	4.4 CiTY-ST-ZiP		Discourage Principles
TITLE		☐ DELETE	5 1 1IILE		Change Addition
NAME			5.2 NAME		
STREE1 ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		P DECETE	5 4 CHY+ST+ZIP		El Chance El Marie
THILE		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREFT ADDRESS			6.3 STREET ADDRESS		
City-St-ZiP			6.4 CITY - ST - ZIP	for the execution stated in Section 110	

Loo nerepy certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 eath; 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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED N

QUAL