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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

٦	1996	DIVISION OF C	CORPORATIONS	]	
DOCUN 1. Corporation		32 (0)			
	ASY CAJUN OF ATLANTA	A. INC.			
<b>D</b> , G <b>D</b>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Principal Place		Mailing Address			
4400 ASHFORD DUNWOODY RD 10300 SOUTHSIDE B SUITE 1322 STE 305			.VD.		
ATLANTA G		JACKSONVILLE FL 32	256	3. Date Incorporated or Qualified	3a. Date of Last Report
US		U\$		07/09/1992	05/01/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
n			ton Street	59-3133074	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	A	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		27 Su to 30 City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Jackson	ille Fc	Trust Fund Contribution	Added to Fees
Zip Country		Zip	Country	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	
24	25 9. Name and Address of Curre	29 323576	30	Florida Statutes Yes  10. Name and Address of New R	
	g, Name and Address of Carre	in registered regent	81 Name	10.	
DRAUG	GHON, RICHARD S		82 Street Addr	ess (P.O. Box Number is Not Acceptab	(e)
200 W.FORSYTH ST. STE 1730				653 (1.16) 50 (1.16)	<del></del>
			83		
JACKS	SONVILLE FL 32202		84 City		85 Zip Code
11 Durouant to	o the provisions of Sections 607 050	02 and 607 1508. Florida Statute	s the above-named coroor	ration submits this statement for the pur	nose of changing its registered office
or registere	ed agent, or both, in the State of Flo	rida. Such change was authorize	d by the corporation's boa	rd of directors. I hereby accept the appo	sintment as registered agent. I am
SIGNATURE _	it, and accept the obligations of, bet	30011 007.00005; 1101100 otololos.			
_	Signature, typed or printed name of registered ago		E: Registered Agent signature require		DATE
12.	OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	GERS AND DIRECTORS IN 12  Change Addition
NAME	YEN, KUNG-PO		12 NAME		
STREET ADDRESS	10300 SOUTHSIDE BLVD, #305		1 3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32256		1.4 CITY-ST-ZIP		·
TITLE	SOVT	DEFELE	2. 1 TITLE		Change Addition
NAME	YEN, KUNG-TI 10300 SOUTHSIDE BLVD. #305		2.2 NAME		
STREET ADDRESS	JACKSONVILLE FL	#303	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	ONONO DITTIELE TE	DELETE	3. 1 TITLE		Change Addition
NAME		<del></del>	3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-ST-ZIP		FM NO FTE	3.4 CITY - ST - ZIP		Chance Addition
TITLE		DELETE	4. 1 TITLE 4.2 NAME		Change Addition
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		ليا مديداد	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST- ZIP		
cortify that	t the information indicated on this an	nual report or supplemental anni	ual report is true and accura	for the exemption stated in Section 119 ate and that my signature shall have the	same legal effect as it made under
oath: that	I am an officer or director of the corp Block 12 or Block 13 if changed, o	poration or the receiver or trustee	e empowered to execute th	is report as required by Chapter 607, Fl	orida Stallutes; and that my name
	c 11	• 1		2/10/	A . V. 1 2/2 - 2/1
SIGNAT	URE: LK	OR PRINTED NAME OF SIGNING OFFICE	POR DIRECTOR	3/15/9 l	(9 o (1) 363 - 0366 Clayting Proce #
	SKINA LUNE AND TYPED	OH PAINTED NAME OF SIGNING OFFICE	n on Diffection	Date	arogin no i nombo e