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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # V74309 (8) 1. Corporation Name					
BIG (easy cajun - Garden Ci	TY, INC.		1 48814 W(481) 18211 B1846 11141 B	
Principal Place		Mailing Address			8110 1911 01811 01811 61811 81811 81811 FIR11 1 8811
STE. 2114 SUITE 305 GARDEN CITY NY 11530 JACKSONVILLE FL		10300 SOUTHSIDE BLY SUITE 305	/D		
		JACKSONVILLE FL 322	56	Date Incorporated or Qualified	3a. Date of Last Report
υ\$		US		10/27/1992	05/01/1995
Principal Place of Business Total		2a. Mailing Address 26 7411 Fullerton Street		4. FEI Number 59-3147335	Applied For
Suite, Apt. #, etc.		26 7411 Fullerton Street Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27 Suite 20	4	5. Certificate of Status Desired	Fee Required
City & State		Gity & State	,	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Jacksonul		Trust Fund Contribution	Added to Fees
24	Country	^{Zip} 3225ω :	Country 30	8. This corporation has liability for in Florida Statutes Yes	intangib'e tax under si 199.032, □ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	
			81 Name		
Draughon, Richard S 200 W. Forsyth Street Suite 1730			82 Street Addr	ess (P.O. Box Number is Not Acceptab	vie)
			83		
JACKSONVILLE FL 32202					
With the second			84 City		85 Zip Code
11. Pursuant to or register familiar wit	o the provisions of Sections 607.0502; ed agent, or both, in the State of Florid h, and accept the obligations of, Section	and 607.1508, Florida Statutes, a. Such change was authorized in 607.0505, Florida Statutes.	the above-named corpor by the corporation's boar	ation submits this statement for the pur of directors. I hereby accept the appo	pose of changing its registered office ointment as registered agent. I am
SIGNATURE	•	·			
	Signature, typed or printed name of registered agent a OFFICERS AND		Registered Agent signature requires		DATE
12. TITLE	DP OFFICENS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFI	Change Addition
NAME	yen, kung-po	_	1.2 NAME		
STREET ADDRESS	200 W. FORSYTH ST. STE 1730		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	·	1.4 CITY - ST - ZIP		
TITLE	VEN VINCTI	DELETE	2. 1 TITLE		Change Addition
NAME	IACKCONDALLE EL		2.2 NAME		
STREET ADDRESS City-St-Zip			2.3 STREET ADDRESS		
TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		_	3 2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-ST-ZIP			3 4 CITY - ST - ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME STREET ADDOCSS			4 2 NAME		
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE	44.4	[] DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		Change Addition
NAME		<u> </u>	5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6. 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	v certify that the information supplied w	th this filing is voluntarily furnish.	6.4 CiTY-ST-ZIP	or the exemption stated in Section 119	07/3/W Florida Statutos I further

rou nereuly certify that the information supplied with this filling is voluntarily turnished 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 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: KUN4-P. Yen

3/15/16 (904)363-0366