

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000087919

1. Entity Name
CHINA GRILL MANAGEMENT, INC.

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90029 045 ***150.00

Principal Place of Business

**404 WASHINGTON AVE
ATTN: CHINA GRILL
MIAMI BEACH FL 33139**

Mailing Address

**404 WASHINGTON AVE
ATTN: CHINA GRILL
MIAMI BEACH FL 33139**

911200



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0460112**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHODOROW, JEFFREY
404 WASHINGTON AVE
ATTN: CHINA GRILL
MIAMI BEACH FL 33139**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CHODOROW, JEFFREY 19925 NE 39TH PL., PH 701 AVENTURA FL 33180	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV POLSENBERG, JACK 4 GARTLEY DR. NEWTOWN SQUARE PA	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FAGGEN, NEIL 155 COOPERTOWN ROAD HAVERFORD PA	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1248 GULPH CREEK DRIVE RADNOR PA 19087	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK POLSENBERG, VICE PRESIDENT

1-22-2001

Date

305 957-0800

Daytime Phone #

CR2E034 (10/00)