

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000087919 1. Entity Name CHINA GRILL MANAGEMENT, INC.	
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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
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DO NOT WRITE IN THIS SPACE



01092004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0460112	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CHODOROW, JEFFREY 404 WASHINGTON AVE ATTN: CHINA GRILL MIAMI BEACH, FL 33139
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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CHODOROW, JEFFREY 19925 NE 39TH PL., PH 701 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV POLSENBERG, JACK 4 GARTLEY DR. NEWTOWN SQUARE, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FAGGEN, NEIL 1248 GULPH CREEK DR RADNOR, PA 19087
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/16/04-80007-003 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 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	Date 1-10-04	Daytime Phone # (305) 957-0800
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JACK POLSENBERG, Vice President