2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G16483

CHODOROW VENTURES, INC.



Principal Place of Business

% CY PROPERTIES, INC. 404 WASHINGTON AVE., ATTN:CHINA GRILL MIAMI BEACH, FL 33139

Mailing Address

% CY PROPERTIES, INC. 404 WASHINGTON AVE., ATTN:CHINA GRILL MIAMI BEACH, FL 33139

FILED Mar 12, 2007 08:00 A Secretary of State

Fee Required



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 02162007 Applied For 4. FEI Number 59-2241813 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

CY PROPERTIES, INC. 404 WASHINGTON AVE. ATTN: CHINA GRILL MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ρ ions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign F			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHODOROW, JEFFREY R. 19925 NE 39 PLCAE, PH 701 AVENTURA, FL 33180				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000662154 03/21/07-80001-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		:	DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS	Λ /				e v

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GOSTOCION. EFFRE