

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G90146

FILED  
Jan 04, 2011  
Secretary of State

Entity Name: CHATEAUBLEAU INN, INC.

**Current Principal Place of Business:**

1111 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134 33

**New Principal Place of Business:**

**Current Mailing Address:**

1111 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134 33

**New Mailing Address:**

FEI Number: 65-0029133      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRILLAS, BOB  
1111 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: GRILLAS, BOB  
Address: 1111 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD  
Name: GRILLAS, DIMITRIOS  
Address: 1111 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL 33134

Title: PD  
Name: GRILLAS, CONSTANTINOS  
Address: 1111 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BOB GRILLAS

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

VPD

01/04/2011

\_\_\_\_\_ Date