2005 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Mar 30, 2005 08:00 AM **DOCUMENT # G99838 Secretary of State** 1. Entity Name CY PROPERTIES, INC. Mailing Address Principal Place of Business ... % COREPROPERTIES, INC. % COREPROPERTIES, INC. 404 WASHINGTON AVE., ATTN: CHINA GRILL 404 WASHINGTON AVE., ATTN: CHINA GRILL MIAMI BEACH, FL 33139 ___ MIAMI BEACH, FL 33139 CR2E034 (10/03) 01172005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number 23-2192222 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COREPROPERTIES, INC. DO NOT WRITE 404 WASHINGTON AVE. ATTN: CHINA GRILL IN THIS SPACE MIAMI BEACH, FL 33139 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. Þη TITLE CHODOROW, JEFFREY NAME STREET ADDRESS 19925 NE 39 PL PH 701 HBBHHD28U784 CITY-ST-ZIP AVENTURA, FL 03/30/65-80033-019 150.00 YOGEL, LARRY D. NAME STREET ADDRESS 748 CANTERBURY LN CITY-ST-ZIP VILLANOVA, PA TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE:

12. I hereby certify that the information supplied with this filling 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 of 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 repeiver 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. 305.957 0200

1.25.2605

Daytime Phone #