FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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FLORIDA DEPARTMENT OF STATE

PROFIT

CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** G99893 (1)COMMERCIAL PROPERTIES GROUP, INC. Principal Place of Business Mailing Address % CY Properties, Inc. % CY Properties, Inc. 404 Washington Ave 404 Washington Ave DO NOT WRITE IN THIS SPACE Miami Beach, FL 33139 Miami Beach, FL 33139 3. Date Incorporated or Qualified Attn: China Grill Attn: China Grill 04/25/1984 2. Principal Place of Business 2a. Mailing Address Applied For 23-2131107 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #. etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 CY PROPERTIES, INC. 82 Street Address (P.O. Box Number is Not Acceptable) **404 WASHINGTON AVE** MIAMI BEACH, FL 33139 83 Aton: China Grill 84 City Zip Code F 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted their ordined segment and should applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. CR2E034 (10/97 DELETE TITLE 1.1 TITLE Change ☐ Addition PD NAME CHODOROW, JEFFREY R. 12 NAME 13 STREET ADDRESS STREET ADDRESS 19355 Turnberry Way CITY - ST - ZIP N. Miami Beach FL 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME YOGEL, LARRY D. 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS 342 Grays Lane CITY-ST-ZIP Haverford PA 2. 4 CITY-ST-ZIP DELETÉ TITLE 3.1 TITUE Change ☐ Addition 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP 600002468696° -03/26/98--01007--008 ***150.00 DELETE TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-7IP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY - ST - ZIP 14. Thereby certify that the information indicated on this annual report of officer or director of the corporate Block 12 or Block 13 if change is a or supplied with this hing does not cyclify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplied entitle annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an on or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Mar 25 1998 8:00am