

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000061358

1. Entity Name
CPF MANAGEMENT, INC.



Principal Place of Business
**C/O CHINA GRILL
404 WASHINGTON AVE
MIAMI BEACH, FL 33139**

Mailing Address
**C/O CHINA GRILL
404 WASHINGTON AVE
MIAMI BEACH, FL 33139**



01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1025072	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CHODOROW, JEFFREY
C/O CHINA GRILL
404 WASHINGTON AVE
MIAMI BEACH, FL 33139**

**DO NOT WRITE
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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**100000437519
02/28/06-00046-001 450.00**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CHODOROW, JEFFREY
STREET ADDRESS	19925 N.W. 39TH PLAE
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	D
NAME	CHODOROW, LINDA
STREET ADDRESS	19925 NE 39 PLACE PH 701
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	D
NAME	POLSENBOEG, JACK
STREET ADDRESS	4 GARTLEY DRIVE
CITY-ST-ZIP	NEWTOWN SQUARE, PA 19073
TITLE	D
NAME	FAGGEN, NEIL
STREET ADDRESS	1248 GULPH CREEK DRIVE
CITY-ST-ZIP	RADNOR, PA 19087
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-06

305.957.0800

Date

Daytime Phone #

JACK POLSENBOEG, VICE PRESIDENT