2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 17, 2006 8:00 am **Secretary of State DOCUMENT # P92000008106** 02-17-2006 90061 041 ***150.00 1. Entity Name CHINA GRILL SOBE, INC. Mailing Address Principal Place of Business 60017310 **404 WASHINGTON AVE 404 WASHINGTON AVE** ATTN: CHINA GRILL ATTN: CHINA GRILL US MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139-2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172006 CR2E034 (11/05) 4. FEI Number Applied For City & State City & State 65-0372005 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CY PROPERTIES, INC. Street Address (P.O. Box Number is Not Acceptable) C/O 404 WASHINGTON AVE ATTN: CHINA GRILL MIAMI BEACH, FL 33139 Zip Code 8. The above named entity submits this statement for the purpose of changing its 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 П Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS ☐ Addition TITLE Delete JACK POLSENBERG NAME NAME 110 WASHINGTON AVE, # 2517 STREET ADDRESS + CARTLEY DR STREET ADDRESS NEWTOWN SQUARE, PA. 19073 CITY-ST-ZIP CITY-ST-ZIP TITLE DV ☐ Delete TITLE Addition CHODOROW, LINDA NAME NAME 19925 NE 39TH PL PH 701 STREET ADDRESS STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-ZIP DΫ Change ☐ Delete TITLE Addition TITLE **NEIL FAGGEN** NAME NAME 1370 FENIMORE LANC 1248 GULPH CREEK DR STREET ADDRESS STREET ADDRESS 250P1 A9 RADNOR, PA 19887 CITY-ST-ZIP GLADWYNE CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CETY-ST-ZIP CITY-ST-ZIP 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

FILED

JACK POLSENBERG, VICE PRESIDENT

e empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like

SIGNATURE