2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P97000038691

1. Entity Name
CHINA GRILL MANAGEMENT BD, INC.

Principal Place of Business	Mailing Address
404 WASHINGTON AVENUE ATTN: CHINA GRILL MIAMI BEACH, FL 33139	404 WASHINGTON AVENUE ATTN: CHINA GRILL MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

01172006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0750539
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CY PARTNERS INC.
CHINA GRILL
404 NE 29TH PL. PH 701
MIAMI BEACH, FL 33139

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CHODOROW, LINDA
STREET ADDRESS	19925 NE 29TH PL., PH 701
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	VTD
NAME	POLSENBERG, JACK
STREET ADDRESS	4 GARTLEY DRIVE
CITY-ST-ZIP	NEWTON SQUARE, PA 19073
TITLE	VSD
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	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/28/06-80074-001 150.00

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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: _____ 2-2-06 305 957-8001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JACK POLSENBERG, VICE PRESIDENT