## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P97000038691**

CHINA GRILL MANAGEMENT BD, INC.



FILED Mar 16, 2007 08:00 A Secretary of State

Principal Place of Business

**404 WASHINGTON AVENUE** ATTN: CHINA GRILL MIAMI BEACH, FL 33139

Mailing Address

**404 WASHINGTON AVENUE** ATTN: CHINA GRILL MIAMI BEACH, FL 33139



DO NOT WRITE IN THIS SPACE 4. FEI Number

02162007 No Chg-P CR2E034 (11/05) Applied For

65-0750539 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

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

## 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, 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, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

DÜÜÜÜÜBEK9389 03/27/07-80068-023 150.00

OFFICERS AND DIRECTORS 10. PΩ TITLE CHODOROW, LINDA NAME STREET ADDRESS 19925 NE 29TH PL., PH 701 CITY-ST-ZIP AVENTURA, FL 33180 TITLE VTD POLSENBERG, JACK NAME 4 GARTLEY DRIVE STREET ADDRESS CITY-ST-ZIP **NEWTON SQUARE, PA 19073** VSD TITLE FAGGEN, NEIL 1248 GULPH CREEK DRIVE STREET ADDRESS **RADNOR, PA 19087** CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 of 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 emo-

POLSENDEDE, VICE PRORIDEST

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO