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Annual Report
Filed 6-22-77

2 pgs.

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE



Bruce A. Smathers
Secretary of State

Form COR 620

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT

1977

FLORIDA DEPT. OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

MIN 20-77 1

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READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

193606 BURGER KING
CORPORATION
C/O THE PILLSBURY COMPANY
608 SECOND AVENUE SOUTH
MINNEAPOLIS, MN 55402

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State

Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

06/02/1956

4. Federal Employer Identification Number (FEIN)

59-0787929

5. Date of Last Report

1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SMITH, DONALD N. ROSEWALL, ARTHUR A.	PRES	X	5940 S.W. 116th Street 2000 N. BAYVIEW BLVD	Miami, FL 33156 MIAMI, FL
HORSTMAYER, K. L. BRADSHAW, J. L.	V.P.	X	999 Mariner Drive 2000 N. BAYVIEW BLVD	Key Biscayne, FL MIAMI, FL
WILLIS, JEAN H	SEC		5781 SW 82ND ST	MIAMI, FL.
DONHOWE, G.M.		DIR	2135 KNAPP ST	ST PAUL, MN
PHILIP AINES, PHILIP D		DIR	1535 Bohn's Pt. Rd. 2000 N. BAYVIEW BLVD	Wayzata, MN 55391 MIAMI, FL
ROSEWALL, ARTHUR A. MINNEAPOLIS, MN		DIR	881 Ocean Drive 2000 N. BAYVIEW BLVD	Key Biscayne, FL MIAMI, FL
CRUNNEY, THOMAS F.	TREAS		8500 S.W. 118th Street	Miami, FL 33156
BROWER, G. W.	ASST SEC		10041 James Circle	Bloomington, MN

7. Registered Agent Information

If you wish to change Registered Agent on this form, enter all new information here

Name LESHNER, ZANE

Street Address (Do NOT Use P.O. Box Number) 7360 NORTH KENDALL DR

City, State and Zip Code

MIAMI, FL. 33156

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following. The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer

G. W. Brower

Title

Assistant Secretary

Telephone Number

Date

6/14/77

THIS REPORT MUST BE ACCOMPANIED BY THE \$5 FEE