

193606

700002561527--2

Annual Report

Filed 6-28-91

2 pgs.

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Bureau of Corporations
DIVISION OF CORPORATIONS

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

Read Instructions on Other Side Before Making Entries
FILING FEE OF \$61.25 REQUIRED

Name of Filing Address: **DOCUMENT # 193603 (1)**

ZIP + 4 PRESORT

BURGER KING CORPORATION
17777 OLD CUTLER ROAD
MIAMI, FL 33157-6325

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

2. If Address of Burger King Corporation is changed, enter the new address below. PO Box is acceptable. The NAME of the Corporation can be changed only by filing an amendment.

21 Street Address

22 PO Box No.

23 City and State

24 Zip Code

\$8.75 Additional Fee required for a Certificate of Status

3. Date of Incorporation: **06/02/1956**

4. FEI Number: **59-0787929**

FEI Number Applied For

FEI Number Not Applicable

CERTIFICATE OF STATUS OF BURGER KING CORPORATION

6. Names of Officers and Directors of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

Title	Name of Officers and Directors	Street Address (Do NOT use Post Office Box Numbers)	City and State
P/D	GIBBONS, BARRY J.	9701 SW 60 CT	MIAMI, FL
V/T	CONNER, C. SCOTT	198 SENTINEL DR	MARIETTA, GA
D	STETSON, ROBERT J.	6161 SW 123 TERR	MIAMI, FL
D	CHANDLER, J. HOWARD	200 S 6TH ST	MPLS, MN
A/S	JOHNSON, LESLIE R	1660 JEALAM RD	MINNETONKA, MN

REGISTERED AGENT INFORMATION

THOMSON, ROGER F.,
17777 OLD CUTLER ROAD
MIAMI, FL 33157

81 Name

82 Street Address

83 City and State

84 City

FL

SIGNATURE

(Signature of Registered Agent)

10. I certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature is in accordance with the provisions of the Florida Statutes and that I am an officer or director of the Corporation. In the event of a change of address, I will file a change of address with the Department of State.

SIGNATURE

Typed Name of Signing Officer or Director

LESLIE R. JOHNSON

Title

ASSISTANT SECRETARY

DATE 6/24/91

Phone No. 330-8247

FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State \$8.75 Additional Fee required for a Certificate of Status