

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR -9 PM 4:18

DOCUMENT # **K54636** (1)

1. Corporation Name  
**BURGER MART TWO, INC.**

Principal Place of Business Mailing Address  
**9990 S.W. 77TH AVE. SUITE #402 MIAMI FL 33156**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21. Suite, Apt. #, etc. <b>Penthouse #8</b>		26. Suite, Apt. #, etc. <b>Penthouse #8</b>		<b>12/29/1988</b>	<b>04/25/1994</b>
22. City & State		27. City & State		4. FEI Number	Applied For
23. Zip		28. Zip		<b>65-0105904</b>	<input type="checkbox"/> Not Applicable
24. Country		29. Country		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
25. Country		30. Country		6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
26. Country		31. Country		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BRICKELL REGISTERED AGENT, INC. 1395 BRICKELL AVE., THIRD FLOOR MIAMI FL 33131				Atlantis Registered Agents, Inc. 25 S.E. 2nd Ave. #919 Miami FL 33131			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, in submitting this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida, such change was authorized by the corporation's board of directors, I hereby certify that I am a director of the corporation, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Sandra Burger*, President *GERALD DAMSKY*, President  
DATE: *3/6/95*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>BURGER, SANDRA</b>	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BURGER, SANDRA</b>	1.2 NAME	
STREET ADDRESS	<b>9990 S.W. 77 AVE STE 402</b>	1.3 STREET ADDRESS	<b>9990 S. W. 77th Ave., PH #8</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	<b>Miami, Florida 33156</b>
TITLE	<b>PSD</b>	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BURGER, SANDRA</b>	2.2 NAME	
STREET ADDRESS	<b>9990 S.W. 77 AVE STE 402</b>	2.3 STREET ADDRESS	<b>9990 S. W. 77th Ave., PH#8</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	2.4 CITY-ST-ZIP	<b>Miami, Florida 33156</b>
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *1/17/95* (305) 271-5757