


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # K77832
 1. Entity Name
BURGER MART THREE, INC.



Principal Place of Business Mailing Address
9990 S.W. 77TH AVE. **9990 S.W. 77TH AVE.**
PENTHOUSE #B **PENTHOUSE #B**
MIAMI, FL 33156 US **MIAMI, FL 33156 US**



04172006 No Chg-P CR2ED34 (1/1/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0113703** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BURGER, SANDRA
8990 SW 77TH AVE, PH#8
MIAMI, FL 33156

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 _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____

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 NAME STREET ADDRESS CITY-ST-ZIP	PST BURGER, SANDRA 9990 SW 77TH AVE PH#8 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURGER, SANDRA 9990 SW 77TH AVE PH#8 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BURGER, ANDREW 9990 SW 77 AVE., PH8 MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BURGER GREENBERG, SUSUAN 9990 SW 77 AVE., PH8 MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/16/06-80034-013 150.00

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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: S. BURGER 4/28/06 305-271-5757
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #