


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # M42524
 1. Entity Name
 ROOT BEER DRIVE IN, INC.



Principal Place of Business C/O RENE BORUNET 11101 NW 27TH AVE MIAMI, FL 33167	Mailing Address C/O RENE BORUNET 11101 NW 27TH AVE MIAMI, FL 33167
---	---

DO NOT WRITE IN THIS SPACE



04232007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2740516	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BORUNET, RENE
 11101 NW 27TH AVE
 MIAMI, FL 33167

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 _____ DATE _____
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

U00000746504
 05/16/07-80071-011 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BINKER, MARIA 11101 NW 27 AVE MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BORUNET, MARTHA 11101 NW 27 AVE MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BORUNET, RENE 11101 NW 27 AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NGYIP, JOANNA 11101 NW 27 AVE MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 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: *Maria Binker Pres* **4/25/07** **(305) 687-5809**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #