

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

**DOCUMENT # M43542**

**1. Entity Name**

THE BURGER GROUP, INC.



**Principal Place of Business**

9990 SW 77 AVE  
PH 8  
MIAMI, FL 33156

**Mailing Address**

9990 SW 77 AVE  
PH 8  
MIAMI, FL 33156



04202006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
59-2756640

**Applied For**  
Not Applicable

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

BURGER, S  
9990 SW 77TH AVENUE  
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**

Signature, typed or printed name of registered agent and fee is applicable

(NOTE: Registered Agent signature required when reinstating)

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**  
DC  
**NAME**  
BURGER, ALVIN  
**STREET ADDRESS**  
9990 SW 77 AVE PH 8  
**CITY-ST-ZIP**  
MIAMI, FL

**TITLE**  
DVT  
**NAME**  
BURGER, SANDRA  
**STREET ADDRESS**  
9990 SW 77 AVE PH 8  
**CITY-ST-ZIP**  
MIAMI, FL

**TITLE**  
P  
**NAME**  
BURGER, SANDRA  
**STREET ADDRESS**  
9990 SW 77 AVE PH 8  
**CITY-ST-ZIP**  
MIAMI, FL

**TITLE**  
VP  
**NAME**  
BURGER, ANDREW  
**STREET ADDRESS**  
9990 SW 77 AVE PH 8  
**CITY-ST-ZIP**  
MIAMI, FL

**TITLE**  
VP  
**NAME**  
BURGER GREENBERG, SUSAN  
**STREET ADDRESS**  
9990 SW 77 AVE PH 8  
**CITY-ST-ZIP**  
MIAMI, FL

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

000000555456  
05/16/06-80034-008 150.00

**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 110, 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 007, 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:**

X *S. BURGER* 4/28/06 305-271-5757

Signature and typed or printed name of signing officer or director

Date

Signature Page 1