

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V69789

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: BURGER KING SWEDEN INC.

**Current Principal Place of Business:**

5505 BLUE LAGOON DRIVE  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

5505 BLUE LAGOON DRIVE  
MIAMI, FL 33126 US

**New Mailing Address:**

FEI Number: 65-0409063      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEOD ( ) Delete  
Name: CHIDSEY, JOHN W  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: TD ( ) Delete  
Name: WELLS, BEN K  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: S ( ) Delete  
Name: CHWAT, ANNE  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: SVPD ( ) Delete  
Name: BLUM, W. BARRY  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: AT ( ) Delete  
Name: LELAND, RICHARD  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: AS ( ) Delete  
Name: GILES-KLEIN, LISA  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: CHWAT, ANNE  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: VP (X) Change ( ) Addition  
Name: ANDERSON, CHRIS  
Address: 5505 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA GILES-KLEIN

AS

04/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date