2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 193606

Entity Name: BURGER KING CORPORATION

Current Principal Place of Business:

5707 BLUE LAGOON DR MIAMI. FL 33126

Current Mailing Address:

5707 BLUE LAGOON DR MIAMI, FL 33126 US

FEI Number: 59-0787929 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

Name

Name

Date Electronic Signature of Registered Agent

Title

Officer/Director Detail :

DIRECTOR & PRESIDENT Title Title **DIRECTOR & ASSISTANT**

SECRETARY CIL, JOSE

GILES-KLEIN, LISA Name Address 5707 BLUE LAGOON DRIVE

5707 BLUE LAGOON DRIVE Address City-State-Zip: MIAMI FL 33126

City-State-Zip: MIAMI FL 33126

Title **DIRECTOR & SECRETARY**

TOME, VICENTE Name Name MONTINI, FLAVIO

Address 5707 BLUE LAGOON DRIVE 5707 BLUE LAGOON DRIVE Address

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

Title ASSISTANT SECRETARY

ASSISTANT SECRETARY Title Name GRANAT, JILL Name GONZALEZ, ESTHER

Address 5707 BLUE LAGOON DRIVE Address 5707 BLUE LAGOON DRIVE

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

Title CONTROLLER AND CHIEF Title **HEAD OF FINANCE**

ACCOUNTING OFFICER MAIA, LUIS Name

FRIESNER, JACQUELINE Address 5707 BLUE LAGOON DRIVE 5707 BLUE LAGOON DRIVE Address

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

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TREASURER

I hereby 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 all other like empowered.

04/02/2020 SIGNATURE: MICHELE KEUSCH ASSISTANT SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 02, 2020

Secretary of State

7387210642CC

Officer/Director Detail Continued:

HEAD OF TAX Title Title ASSISTANT SECRETARY

Name SCHICHTEL, MARK Name DOMANKO, JON

Address 5707 BLUE LAGOON DRIVE Address 130 KING STREET WEST

EXCHANGE TOWER, 3RD FLOOR MIAMI FL 33126 City-State-Zip: TORONTO ONTARIO M5X 1E1 City-State-Zip:

Title

COO

Title

CFO

DUNNIGAN, MATTHEW Name Name KOBZA, JOSHUA

5707 BLUE LAGOON DRIVE Address Address 5707 BLUE LAGOON DRIVE

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

Title HEAD, TAX PROVISIONING Title ASSISTANT SECRETARY

BOMAR, JIM Name Name KEUSCH, MICHELE

Address 5707 BLUE LAGOON DRIVE Address 5707 BLUE LAGOON DRIVE

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