

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 20, 2013
Secretary of State
CC2975285827

Entity Name: BURGER KING INTERAMERICA, LLC

Current Principal Place of Business:

5505 BLUE LAGOON DRIVE
MIAMI, FL 33126

Current Mailing Address:

5505 BLUE LAGOON DRIVE
MIAMI, FL 33126

FEI Number: 59-1299022

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR & CEO
Name HEES, BERNARDO
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR & CFO
Name SCHWARTZ, DANIEL
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR, GENERAL COUNSEL &
SECRETARY
Name GRANAT, JILL
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title PRINCIPAL ACCOUNTING OFFICER &
CONTROLLER
Name FRIESNER, JACKIE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title ASSISTANT GENERAL COUNSEL &
ASSISTANT SECRETARY
Name GILES-KLEIN, LISA
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title CHIEF INFORMATION &
PERFORMANCE OFFICER
Name GONCALVES, HEITOR
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title CHIEF MARKETING OFFICER
Name FAUGERES, FLAVIA
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title VP, TAX
Name GONZALEZ, ESTHER
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA GILES-KLEIN

ASSISTANT SECRETARY 02/20/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title TREASURER

Name CACERES, BRIAN

Address 5505 BLUE LAGOON DRIVE

City-State-Zip: MIAMI FL 33126