

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 24, 2018
Secretary of State
CC8219062108

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

Title DIRECTOR & PRESIDENT
Name CIL, JOSE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR & SECRETARY
Name TOME, VICENTE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title SVP, CONTROLLER AND CHIEF ACCOUNTING OFFICER
Name FRIESNER, JACQUELINE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title CFO
Name DUNNIGAN, MATTHEW
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title SR. DIRECTOR, FINANCE
Name ALTMANN, GEORGE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title HEAD OF TAX
Name SCHICHEL, MARK
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

Continues on page 2

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA GILES-KLEIN

DIRECTOR & ASSISTANT SECRETARY 04/24/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title TREASURER
Name MONTINI, FLAVIO
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title ASSISTANT TREASURER
Name BRIGLEB, CHRIS
Address 226 WYECROFT ROAD
City-State-Zip: OAKVILLE ONTARIO L6K 3X7