

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000003269

**Entity Name:** BURGER KING ACQUISITION, INC.

**FILED**  
**Apr 12, 2021**  
**Secretary of State**  
**5425160840CC**

**Current Principal Place of Business:**

5707 BLUE LAGOON DRIVE  
MIAMI, FL 33126

**Current Mailing Address:**

5707 BLUE LAGOON DRIVE  
MIAMI, FL 33126 US

**FEI Number: 65-0226098**

**Certificate of Status Desired: No**

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

C T 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

**Officer/Director Detail :**

Title DIRECTOR  
Name CIL, JOSE  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR & SECRETARY  
Name TOME, VICENTE  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

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

Title ASSISTANT SECRETARY  
Name GRANAT, JILL  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title ASSISTANT SECRETARY  
Name GONZALEZ, ESTHER  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title CONTROLLER AND CHIEF  
ACCOUNTING OFFICER  
Name FRIESNER, JACQUELINE  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title HEAD OF FINANCE  
Name MAIA, LUIS  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title HEAD OF TAX  
Name SCHICHTEL, MARK  
Address 5707 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 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.*

**SIGNATURE: MICHELE KEUSCH**

**ASSISTANT SECRETARY 04/12/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title CFO  
Name MATTHEW, DUNNIGAN  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title ASST. SECRETARY  
Name DOMANKO, JON  
Address 130 KING STREET WEST  
EXCHANGE TOWER, 3RD FLOOR  
City-State-Zip: TORONTO ONTARIO M5X 1E1

Title PRESIDENT  
Name FINAZZO, CHRIS  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title HEAD, TAX PROVISIONING  
Name BOMAR, JIM  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR, ASSISTANT SECRETARY  
Name KEUSCH, MICHELE  
Address 5707 BLUE LAGOON DRIVE  
City-State-Zip: MIAMI FL 33126