## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001328

Entity Name: BUSINESS REFERRAL GROUP, INC.

**FILED** Mar 09, 2022 **Secretary of State** 7755008623CC

## **Current Principal Place of Business:**

299 ALHAMBRA CIRCLE SUITE 307

CORAL GABLES, FL 33134

## **Current Mailing Address:**

299 ALHAMBRA CIRCLE SUITE 307 CORAL GABLES, FL 33134 US

FEI Number: 65-0950866 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ADAMS, JOHN C 550 BILTMORE WAY **SUITE 1200** CORAL GABLES, FL 33134 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:

Date Electronic Signature of Registered Agent

City-State-Zip:

Officer/Director Detail:

Title **TREASURER** Title DIRECTOR

Name LAMBERTI, DOMINIC Name PEREZ, ELIZABETH L Address

299 ALHAMBRA CIRCLE 2423 LEJEUNE RD Address SUITE 307 CORAL GABLES FL 33134

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR Title **DIRECTOR** 

Name RUIZ, LYNNE Name MATTHEWS, DEBORAH

Address 1241 SW 27TH AVE Address 19 W FLAGLER ST

City-State-Zip: MIAMI FL 33135 **STE 410** 

City-State-Zip: MIAMI FL 33130

Title **PRESIDENT** 

MARTINEZ, OSMUNDO Title **SECRETARY** Name

MOKHER, JOSEPH 999 PONCE DE LEON BLVD Name Address

STE 735 14059 SW 142 ST Address

CORAL GABLES FL 33134 City-State-Zip: City-State-Zip: MIAMI FL 33186

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

SIGNATURE: DOMINIC L LAMBERTI

TREASURER

03/09/2022