

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001328

**FILED**  
**Apr 18, 2018**  
**Secretary of State**  
**CC9775969273**

**Entity Name:** BUSINESS REFERRAL GROUP, INC.

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title T, VP  
Name LAMBERTI, DOMINIC  
Address 299 ALHAMBRA CIRCLE  
SUITE 307  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name BENJAMIN, JEFFREY  
Address 7685 SW 104TH ST, SUITE 200  
City-State-Zip: MIAMI FL 33156

Title DIRECTOR  
Name KADE, PAUL  
Address 9200 S DADELAND BLVD  
STE 410  
City-State-Zip: MIAMI FL 33156

Title PAST PRESIDENT  
Name PEREZ, ELIZABETH L  
Address 2423 LEJEUNE RD  
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT  
Name LUGO, MARIA  
Address 500 S DIXIE HWY  
STE 203  
City-State-Zip: CORAL GABLES FL 33146

Title SECRETARY  
Name GROSS, LOUISE  
Address PO BOX 330106  
City-State-Zip: MIAMI FL 33233

*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**

**04/18/2018**

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