

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001328

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: BUSINESS REFERRAL GROUP, INC.

## Current Principal Place of Business:

420 S DIXIE HWY  
SUITE 2B  
CORAL GABLES, FL 33146

## New Principal Place of Business:

## Current Mailing Address:

420 S DIXIE HWY  
SUITE 2B  
CORAL GABLES, FL 33146

## New Mailing Address:

FEI Number: 65-0950866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, JOHN C  
540 BILTMORE WAY  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RISTINE, ELIZABETH M  
Address: 3610 SW 13TH ST  
City-St-Zip: MIAMI, FL 33145

Title: VP ( ) Delete  
Name: CASTILLO, CARLOS  
Address: 1550 MADAVGA AVENUE, SUITE 504  
City-St-Zip: CORAL GABLES, FL 33146

Title: TD ( ) Delete  
Name: LAMBERTI, DOMINIC  
Address: 2330 S.W. 27TH TERRACE  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: COHEN, DEREK  
Address: 2525 PONCE DE LEON BLVD, #600  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: CROWTNER, CONNIE  
Address: 269 GIRALDA AVE, SUITE 302  
City-St-Zip: MIAMI, FL 33143

Title: VP ( ) Delete  
Name: GARAOTTI, SARA  
Address: 23500 SW 182 AVENUE  
City-St-Zip: HOMESTEAD, FL 33031

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: CASTILLO, CARLOS  
Address: 1550 MADAVGA AVENUE, SUITE 504  
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: GROSS, LOUISE  
Address: 3685 BATTERSEA RD  
City-St-Zip: CORAL GABLES, FL 33146

Title: D (X) Change ( ) Addition  
Name: CROWTHER, CONNIE  
Address: 2506 PONCE DE LEON, STE 101  
City-St-Zip: CORAL GABLES, FL 33134 60

Title: VP (X) Change ( ) Addition  
Name: GRANZOTTI, SARA  
Address: 23500 SW 182 AVENUE  
City-St-Zip: HOMESTEAD, FL 33031

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOMINIC L LAMBERTI

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04/21/2009

Electronic Signature of Signing Officer or Director

Date