2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 586641

Entity Name: BFTG HOLDING COMPANY, INC.

Current Principal Place of Business:

4425 PONCE DE LEON BLVD 4TH FLOOR CORAL GABLES, FL 33146

Current Mailing Address:

4425 PONCE DE LEON BLVD 4TH FLOOR CORAL GABLES, FL 33146

FEI Number: 59-2742556

Name and Address of Current Registered Agent:

BOMSTEIN, BRIAN ESQ. 4425 PONCE DE LEON BLVD 4TH FLOOR CORAL GABLES, FL 33146 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

Officer/Director Detail :

enneen/Bire	ctor Detail :		
Title	EVPD	Title	PD
Name	HECTOR, NANCY T	Name	ERTEL, DAVID
Address	4425 PONCE DE LEON BLVD., 4TH FLOOR	Address	4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	VP, & TREASURER	Title	VPS
Name	GLASSMAN, MARK	Name	BOMSTEIN, BRIAN E
Address	4425 PONCE DE LEON BLVD 4TH FLOOR	Address	4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Titlo	V	Title	
Title	V	Title	VP
Title Name	V WILLIAMS, MARVIN	Title Name	VP LOMINAC, EVE
	·		
Name	WILLIAMS, MARVIN 4425 PONCE DE LEON BLVD., 4TH FLOOR	Name	LOMINAC, EVE 4425 PONCE DE LEON BLVD 4TH FLOOR
Name Address	WILLIAMS, MARVIN 4425 PONCE DE LEON BLVD., 4TH FLOOR	Name Address	LOMINAC, EVE 4425 PONCE DE LEON BLVD 4TH FLOOR
Name Address City-State-Zip:	WILLIAMS, MARVIN 4425 PONCE DE LEON BLVD., 4TH FLOOR CORAL GABLES FL 33146	Name Address City-State-Zip:	LOMINAC, EVE 4425 PONCE DE LEON BLVD 4TH FLOOR CORAL GABLES FL 33146
Name Address City-State-Zip: Title	WILLIAMS, MARVIN 4425 PONCE DE LEON BLVD., 4TH FLOOR CORAL GABLES FL 33146 VP, & ASST. SECTY	Name Address City-State-Zip: Title	LOMINAC, EVE 4425 PONCE DE LEON BLVD 4TH FLOOR CORAL GABLES FL 33146 VP-CFO

Continues on page 2

VP

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: BRIAN E. BOMSTEIN

Electronic Signature of Signing Officer/Director Detail

FILED Apr 16, 2019 Secretary of State 4558955411CC

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	VP
Name	CHIMIENTI, ANTONIO
Address	4425 PONCE DE LEON BLVD 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146