

**2021 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**Certificate of Status Desired:** No**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

Date

**Officer/Director Detail :**

Title EVPD  
Name HECTOR, NANCY T  
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

Title VP, & TREASURER  
Name GLASSMAN, MARK  
Address 4425 PONCE DE LEON BLVD 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

Title V  
Name WILLIAMS, MARVIN  
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

Title VP, & ASST. SECTY  
Name CARR, THOMAS F  
Address 4425 PONCE DE LEON BLVD 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

Title PD  
Name ERTEL, DAVID  
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

Title VPS  
Name BOMSTEIN, BRIAN E  
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

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

Title VP-CFO  
Name O'NEIL, SEAN  
Address 4425 PONCE DE LEON BLVD 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33146

**Continues on page 2**

*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**

VP

04/27/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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