## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18069

Entity Name: BREATH OF LIFE MINISTRIES, INCORPORATED

**FILED** Mar 22, 2013 **Secretary of State** CC9291753026

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

5210 NORTHWEST 180TH TERRACE

MIAMI. FL 33055-3168

## **Current Mailing Address:**

5210 NORTHWEST 180TH TERRACE MIAMI, FL 33055-3168

FEI Number: 59-2736562 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MOBLEY, CHRISTINE B. 5210 NORTHWEST 180TH TERRACE MIAMI, FL 33055 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:

City-State-Zip:

Date Electronic Signature of Registered Agent

City-State-Zip:

HIALEAH, FL 33017

Officer/Director Detail:

Title Title

MOBLEY, CHRISTINE B. Name CHANEY, KYMBERLY Y. Name

5210 N.E. 180TH TERRACE Address Address 6193 N.W. 183RD ST 174134

MIAMI FL 33055

Title D Title

BOONE, ELLEN Name Name JEAN-LOUIS, CHRISTALYN

Address 3846 N.W. 213TH AVENUE Address PO BOX 693365

City-State-Zip: MIAMI FL 33056 City-State-Zip: MIAMI, FL 33269

Title D

MOBLEY, JAMES Name 5210 NW 180TH TERR Address

City-State-Zip: MIAMI FL 33055

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.

PD

SIGNATURE: CHRISTINE MOBLEY Electronic Signature of Signing Officer/Director Detail 03/22/2013