

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18069

FILED
Apr 20, 2019
Secretary of State
8160274434CC

Entity Name: BREATH OF LIFE DELIVERANCE MINISTRIES, INCORPORATED

Current Principal Place of Business:

6193 NW 183RD STREET
#174134
MIAMI, FL 33017

Current Mailing Address:

6193 NW 183RD STREET
#174134
HIALEAH, FL 33017 US

FEI Number: 59-2736562

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHANEY, KYMBERLY
6193 NW 183RD STREET
#174134
MIAMI, FL 33017 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: KYMBERLY CHANEY

04/20/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name CHANEY, KYMBERLY
Address 6193 N.W. 183RD ST
#174134
City-State-Zip: HIALEAH, FL 33017

Title D
Name MOBLEY, JUANTONJA
Address 9143 NORTH LAKE MIRAMAR CIRCLE
City-State-Zip: MIRAMAR FL 33025

Title OFFICER
Name NURSE, KALIA
Address 5719 N W 74 AVENUE
City-State-Zip: TAMARAC FL 33321

Title D
Name MOBLEY, JAMES
Address 5210 NW 180TH TERR
City-State-Zip: MIAMI FL 33055

Title OFFICER
Name THOMAS, FELISHIA
Address 6193 NW 183RD STREET
#174134
City-State-Zip: MIAMI FL 33017

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: KYMBERLY CHANEY

PRESIDENT

04/20/2019

Electronic Signature of Signing Officer/Director Detail

Date