

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18069

**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  
MIAMI, FL 33017 US

**FEI Number:** 59-2737562

**Certificate of Status Desired:** Yes

**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

05/30/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CHANEY, KYMBERLY  
Address        6193 NW 183RD STREET  
                  #174134  
City-State-Zip: MIAMI FL 33017

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

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

Title            OFFICER  
Name            CORLEY, CHEVARLYN  
Address        7726 CLUBDALE LOOP  
City-State-Zip: ORLANDO FL 32810

Title            OFFICER  
Name            MOBLEY, JUANTONJA  
Address        3355 NW 195TH TERRACE  
City-State-Zip: MIAMI GARDENS FL 33056

*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

05/30/2023

Electronic Signature of Signing Officer/Director Detail

Date