

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000010866

Entity Name: BREAD OF LIFE INTERNATIONAL MISSIONS INC**Current Principal Place of Business:**4174 INVERRARY DR
213
LAUDERHILL, FL 33319**Current Mailing Address:**4174 INVERRARY DR
213
LAUDERHILL, FL 33319 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAYMOND, PIERRE J
4174 INVERRARY DR
213
LAUDERHILL, FL 33319 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 P
Name RAYMOND, PIERRE J
Address 4174 INVERRARY DR STE 213
City-State-Zip: LAUDERHILL FL 33319Title S
Name SAGET, HENRIETTE N
Address 3030 CAMERON DR
City-State-Zip: KESSEMMEE FL 34743Title T
Name EUGENE, JOCELYN
Address 1610 NW 2ND AVE
City-State-Zip: FORT LAUDERDALE FL 33311Title VP
Name ALEXIS, JEAN W
Address 2109 SNOW BIRD DR
City-State-Zip: HARVEY LA 70058Title T
Name DORLUS, THOMAS
Address 9341 NW 39TH COURT SUNRISE FL
City-State-Zip: FORT LAUDERDALE FL 33351Title C
Name MORIN, MARIE MAUDE
Address 9010 SUNRISE LAKES BLVD STE 211
City-State-Zip: SUNRISE FL 33322

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: PIERRE RAYMOND

P

04/30/2022

Electronic Signature of Signing Officer/Director Detail_____
Date