



**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000073241</b> 1. Entity Name INTERNATIONAL MIRACLE GROUP, INC.	
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Principal Place of Business 7520 S.W. 36TH ST. MIAMI, FL 33155	Mailing Address PO BOX 831449 MIAMI, FL 33283
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DO NOT WRITE IN THIS SPACE

		
03132007	No Chg-P	CR2E034 (11/05)
4. FEI Number 27-0021184	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  NICOLINI, NATALIA E 7520 S.W. 36TH ST. MIAMI, FL 33155	<p style="text-align: center; font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) \_\_\_\_\_ DATE \_\_\_\_\_


<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$350.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NICOLINI, NATALIA E 7520 S.W. 36TH ST. MIAMI, FL 33155
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U00000705775  
04/24/07-80007-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Natalia E. Nicolini 3/31/07 (305) 593-8460

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #