

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000287

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** MIRACLE MULTIPLICATION, LLC

**Current Principal Place of Business:**

10235 W. SAMPLE ROAD, UNIT #205  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

10235 W. SAMPLE ROAD, UNIT #205  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 30-0017173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BACHELOR, BYRON  
10235 W. SAMPLE ROAD, UNIT #205  
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: S  
Name: DYER, GLORIA  
Address: 10155 NW 31 CT  
City-St-Zip: SUNRISE, FL 33351

Title: D  
Name: BACHELOR, BYRON  
Address: 10235 W. SAMPLE RD #205  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BYRON BACHELOR

D

01/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date