

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075826

FILED
Mar 24, 2009
Secretary of State

Entity Name: MIRACLES, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

440 S.E. 23 LANE
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

440 S.E. 23 LANE
HOMESTEAD, FL 33033

New Mailing Address:

FEI Number: 20-8154905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCH, KATHLEEN A
440 S.E. 23 LANE
HOMESTEAD, FL 33033 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: MGRN () Delete
Name: CATUMBRO, KATHLEEN A
Address: 440 S.E. 23 LANE
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES:

Title: MGRN (X) Change () Addition
Name: COLUMBRO, KATHLEEN A
Address: 440 S.E. 23 LANE
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: KATHLEEN O COLUMBRO

MGR

03/24/2009

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