

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001406

FILED
Jan 30, 2009
Secretary of State

Entity Name: MARGAUX'S MIRACLE FOUNDATION, INC.

Current Principal Place of Business:

2601 NW 29TH DR
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

2601 NW 29TH DR
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 04-3643503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, NEAL A ESQ.
GROSSMAN AND ROTH, P.A.
2525 PONCE DE LEON BLVD
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

ROTH, NEAL A ESQ.
GROSSMAN AND ROTH, P.A.
2525 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 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:

01/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KALLOS, NILZA MD
Address: 6280 SUNSET DRIVE SUITE 603
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: KALSTONE, CHARLES MD
Address: 6280 SUNSET DRIVE SUITE 500
City-St-Zip: MIAMI, FL 33143

Title: ED () Delete
Name: RUTTENBERG, ROCHELLE
Address: 2601 NW 29TH DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: S () Delete
Name: MCKAY, KATHY
Address: 1298 SW 15TH STREET
City-St-Zip: BOCA RATON, FL 33488

Title: C () Delete
Name: GROSSMAN, STUART
Address: 2525 PONCE DE LEON
City-St-Zip: MIAMI, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: SHEINBAUM, SHARON
Address: 6910 NW 104 LANE
City-St-Zip: PARKLAND, FL 33076

Title: C (X) Change () Addition
Name: GROSSMAN, STUART
Address: 2525 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134

Title: TREA () Change (X) Addition
Name: BURROUGHS, DONNA
Address: 2525 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

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 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 an address, with all other like empowered.

SIGNATURE: ROCHELLE RUTTENBERG

ED

01/30/2009

Electronic Signature of Signing Officer or Director

Date