2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002893

FILED Feb 13, 2007 Secretary of State

Entity Name: INTERNATIONAL BROTHERHOOD IN RECOVERY, INC.

Current Principal Place of Business: New Principal Place of Business: 10363 W. SAMPLE ROAD 7981 NW 37TH DRIVE C/O FAITH CHAPEL CHURCH C/O PAUL JOSEPH MILLER CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33063 US New Mailing Address: **Current Mailing Address:** 10363 W. SAMPLE ROAD 7981 NW 37TH DRIVE C/O FAITH CHAPEL CHURCH C/O PAUL JOSEPH MILLER CPRAL SPRINGS, FL 33065 CPRAL SPRINGS, FL 33063 US FEI Number: 03-0404326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER, PAUL J PRESIDE MILLER, PAUL J PRESIDE 7981 NW 37TH DRIVE 7981 NW 37TH DRIVE CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33063 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: PAUL J. MILLER 02/13/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MILLER, PAUL J Name: Name: 7981 NW 37TH DRIVE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33063 City-St-Zip: Title: () Delete Title: () Change () Addition HOLBROOKE, ANTHONY Name: Name: Address: 5365 STIRLING ROAD, SUITE B Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: Title: () Delete Title: () Change () Addition KEN, DACOSTA Name: Name: 8630 NW 14TH ST Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: Title: V/P (X) Delete Title: () Change () Addition Name: MCLYMONT, KEN Name: Address: 5927 NW 52ND ST Address: City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL JOSEPH MILLER P 02/13/2007