## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000007251

Title:

Name:

Address:

City-St-Zip:

FILED Apr 26, 2006 Secretary of State

DOCON	VILIVI# 1402	2000001201				Secretary 0	I State
<b>Entity Na</b>	me: GREEN	MIRACLES INC.					
Current Principal Place of Business:				New Principal Place of Business:			
3527 GRIF	FIN RD						
FT LAUDE	ERDALE, FL 3	33312					
O 4 B	4 - :   :			M R# -:11:	0 .1 .1		
Current IV	Mailing Addre	ss:		New Maili	ng Addres:	5:	
3527 GRIF FT LAUDE	FFIN RD ERDALE, FL 3	33312					
FEI Number	: 59-3764228	FEI Number Appli	ed For()	FEI Number Not Appl	icable ( )	Certificate of Status Des	sired ( )
Name and	d Address of	Current Registere	d Agent:	Name and	Address o	f New Registered Agen	t:
JACOB, M 3527 GRIF FT LAUDE		33312 US					
The above in the State	e named entity e of Florida.	submits this stater	nent for the p	ourpose of changing i	ts registere	d office or registered age	nt, or both,
SIGNATU	RE:						
	Electro	nic Signature of Re	gistered Age	ent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ( DINDIYAL, NA 5741 SW 39TH DAVIE, FL 33	H ST		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	LISA, MATUTE 8201 SW 9TH	) Delete ERDALE, FL 33068		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MATUTE, LISA 8201 SW 9TH			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	SECT (						

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: NARAYAN DINDIYAL PD 04/26/2006

( ) Delete

LAUDERDALE LAKES, FL 33313

RAMDEEN, SHERRY K

3831 NW 24TH ST

(X) Change ( ) Addition

RAMDEEN, SHERRY K

LAUDERDALE LAKES, FL 33313

3831 NW 24TH ST