2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010615

FILED Apr 06, 2008 Secretary of State

Entity Name: CITY OF EXCELLENCE MIRACLE CENTER INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business:

7155 PEMBROKE ROAD 19821 NW 2ND AVENUE

MIRAMAR, FL 33023 SUITE 424

MIAMI, FL 33169

Current Mailing Address: New Mailing Address:

19821 NW 2ND AVENUE 7155 PEMBROKE ROAD MIRAMAR, FL 33023

SUITE 424

MIAMI, FL 33169 US

FEI Number: 75-3203175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HAIRSTON, ELIZABETH A HAIRSTON, ELIZABETH A 7155 PEMBROKE ROAD 19821 NW 2ND AVENUE MIRAMAR, FL 33023 SUITE 424

MIAMI, FL 33169 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: MELINDA Y. JOHNSON 04/06/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete HAIRSTON, ELIZABETH A HAIRSTON, ELIZABETH A Name: Name: 7155 PEMBROKE ROAD Address: 19821 NW 2ND AVENUE #424 Address:

City-St-Zip: MIRAMAR, FL 33023 US City-St-Zip: MIAMI, FL 33169 US

Title: SEC. () Delete Title: SEC. (X) Change () Addition Name: EVANS, CHARLOTTE Name: EVANS, CHARLOTTE

Address: 7155 PEMBROKE ROAD Address: 19821 NW 2ND AVENUE # 424 City-St-Zip: MIRAMAR, FL 33023 US City-St-Zip: MIAMI, FL 33169 US

Title: TRE () Delete Title: () Change () Addition

RAMONE, PRESTON Name: Name: Address: 1738 ST. IVES CROSSING Address: City-St-Zip: STOCKBRIDGE, GA 30281 City-St-Zip:

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: ELIZABETH A. HAIRSTON Ρ 04/06/2008