2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000001325

Entity Name: MIRACLES BY THE BAY, INC.

FILED Apr 02, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7777 NE BAYSHORE COURT 7777 NE BAYSHORE COURT MIAMI, FL 3138 #104 MIAMI, FL 33138 **Current Mailing Address: New Mailing Address:** 1402 KENNEDY CAUSEWAY 1402 KENNEDY CAUSEWAY PMB 210 PMB 210 NORTH BAY VILLAGE, FL 33141 NORTH BAY VILLAGE, FL 33141 US FEI Number: 65-0900565 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MERLINO, WILLIE MERLINO, WILLIE 7777 NE BAYSHORE COURT 7777 NE BAYSHORE COURT MIAMI, FL 3138 #104 MIAMI, FL 33138 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: 04/02/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Change () Addition () Delete MERLINO, WILLIE Name: Name: 7777 NE BAYSHORE CT STE 104 Address: Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip: Title: () Delete Title: () Change () Addition SIBLEY, CHARLES Name: Name: Address: 1295 BRICKELL AVE STE D-207 Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: () Delete Title: () Change () Addition COLLINS, CAROLINE Name: Name: 7777 NE BAYSHORE D-102 Address: Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SALERNO, ROLAND JR. Name: Address: 981 S.E. 20TH STREET, A-45, BOX 9 Address: City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: Title: Title: () Delete () Change () Addition SCOTT, JERRY Name: Name: 7900 INVERTON ROAD, APT. 203 Address: Address: City-St-Zip: ANNANDALE, VA 22003 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIE MERLINO DP 04/02/2002