

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004866

FILED
Apr 19, 2005
Secretary of State

Entity Name: JEUNE JESUS MIRACLE, INC.

Current Principal Place of Business:

P.O. BOX 681965
MIAMI, FL 33168 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 681965
MIAMI, FL 33168 US

New Mailing Address:

FEI Number: 65-0941873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOUCHETTE, MARIE J
1375 NW 12TH STREET
MIAMI, FL 33167 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOUCHETTE, MARIA J
Address: 1375 NW 127TH STREET
City-St-Zip: MIAMI, FL 33167

Title: VTD () Delete
Name: LOUIS, NICOLE J
Address: 21211 NE 2 AVE
City-St-Zip: N MIAMI BEACH, FL 33179

Title: SD () Delete
Name: ALCINDOR, MARIE ANGE
Address: 3441 NW BROADMANOR RD
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: BAPTISTE, ANITA JEAN
Address: 1375 NW 127TH STREET
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: BOUCHETTE, KIMBERLY
Address: 1375 NW 127 ST
City-St-Zip: MIAMI, FL 33167

Title: D () Delete
Name: JEANTILUS, CLEIMENT S
Address: 6985 NW 2ND AVENUE
City-St-Zip: MIAMI, FL 33150

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

Title: () Change () Addition
Name:
Address:
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: MARIE J BOUCHETTE

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date