2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004866

Entity Name: JEUNE JESUS MIRACLE, INC.

FILED Apr 17, 2007 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
P.O. BOX 681965				1375 NW 12TH STREET	
MIAMI, FL	33168 US		MIAMI, FL 33167	US	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX MIAMI, FL					
FEI Number	: 65-0941873	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:	
	TTE, MARIE J 12TH STREET 33167 US				
The above in the State	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATUI					
	Electror	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () BOUCHETTE, N 1375 NW 127T MIAMI, FL 331	H STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () CHARITE, MAR 335 IVES DAIR MIAMI, FL 331	Y UNIT 8	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () ALCINDOR, MA 3441 NW BRO MIAMI, FL 331	ADMANOR RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BAPTISTE, ANI 1375 NW 127T MIAMI, FL 331	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BOUCHETTE, I 1375 NW 127 S MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () JEANTILUS, CI 6985 NW 2ND MIAMI, FL 331	AVENUE	Title: Name: Address: Citv-St-Zin:	() Change () Addition	

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: MARIE BOUCHETTE PD 04/17/2007