

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 15, 2009
Secretary of State

DOCUMENT# N99000004866

Entity Name: JEUNE JESUS MIRACLE, INC.

Current Principal Place of Business:1375 NW 12TH STREET
MIAMI, FL 33167 US**New Principal Place of Business:**11250 NW 7 AVENUE
MIAMI, FL 33168 US**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 ()

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:**BOUCHETTE, MARIE J
20422 NW 7 COURT
MIAMI GARDENS, 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: _____

10/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: BOUCHETTE, MARIE J
Address: 1375 NW 127TH STREET
City-St-Zip: MIAMI, FL 33167Title: VP () Delete
Name: CHARITE, MARJORIE
Address: 335 IVES DAIRY UNIT 8
City-St-Zip: MIAMI, FL 33167Title: SD () Delete
Name: ALCINDOR, MARIE ANGE
Address: 3441 NW BROADMANOR RD
City-St-Zip: MIAMI, FL 33147Title: D () Delete
Name: BAPTISTE, ANITA JEAN
Address: 1375 NW 127TH STREET
City-St-Zip: MIAMI, FL 33167Title: D () Delete
Name: BOUCHETTE, KIMBERLY
Address: 1375 NW 127 ST
City-St-Zip: MIAMI, FL 33167Title: D (X) Delete
Name: JEANTILUS, CLEIMENT S
Address: 6985 NW 2ND AVENUE
City-St-Zip: MIAMI, FL 33150**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: BOUCHETTE, MARIE J
Address: 20422 NW 7 COURT
City-St-Zip: MIAMI GARDENS, FL 33169Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
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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 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

10/15/2009

Electronic Signature of Signing Officer or Director

Date