## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000130173

City-St-Zip:

Entity Name: MIRACLE WOODWORKING, INC.

FILED Jan 04, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 1817 108 SW 266TH ST NEWBERRY, FL 32669 NEWBERRY, FL 32669 **Current Mailing Address: New Mailing Address:** P.O. BOX 1817 NEWBERRY, FL 32669 FEI Number: 33-1074285 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: CANNON, JEAN ANN CANNON, JEAN ANN 5700 SW 48TH ST 108 SW 266TH ST BELL, FL 32619 NEWBERRY, FL 32669 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: 01/04/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CANNON, JOE RAY JR Name: Name: P.O. BOX 1817 Address: Address: City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: ( ) Delete Title: Title: () Change () Addition CANNON, JEAN ANN Name: Name: P.O. BOX 1817 Address: Address: NEWBERRY, FL 32669

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN ANN CANNON 01/04/2007 S