2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000033169

Entity Name: EZ MIRACLE PROCESSING, INC

FILED Jul 10, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7359 ALOMA AVE.

WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

7359 ALOMA AVE. WINTER PARK, FL 32792

FEI Number: 59-3801103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANCHEZ, ZAIDA R
1668 WILD INDIGO TERRACE
OVIEDO, FL 32766 US
SANCHEZ, ZAIDA R
7359 ALOMA AVENUE
WINTER PARK, FL 32792 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: ZAIDA R. SANCHEZ 07/10/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 SANCHEZ, ZAIDA R
 Name:
 SANCHEZ, ZAIDA R

 Address:
 1668 WILD INDIGO TERRACE
 Address:
 7359 ALOMA AVENUE

 City-St-Zip:
 OVIEDO, FL 32766
 City-St-Zip:
 WINTER PARK, FL 32792

Title: D () Delete Title: VPD (X) Change () Addition

 Name:
 ECHEVARRIA, EDWARD
 Name:
 TAVAREZ, ROSALYN

 Address:
 1668 WILD INDIGO TERRACE
 Address:
 7359 ALOMA AVENUE

 City-St-Zip:
 OVIEDO, FL 32766
 City-St-Zip:
 WINTER PARK, FL 32792

Title: VPD (X) Delete Title: () Change () Addition

 Name:
 TAVAREZ, ROSALYN
 Name:

 Address:
 1669 WILD INDIGO TERRACE
 Address:

 City-St-Zip:
 OVIEDO, FL 32766
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZAIDA R. SANCHEZ PRES 07/10/2007