2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033169

Entity Name: EZ MIRACLE PROCESSING, INC

FILED Jan 03, 2008 Secretary of State

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

7359 ALOMA AVE. 7359 ALOMA AVENUE WINTER PARK, FL 32792

SUITE 100 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

7359 ALOMA AVENUE 7359 ALOMA AVE SUITE 100 WINTER PARK, FL 32792

WINTER PARK, FL 32792

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

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

ALVAREZ, DELIA ALVAREZ, DELIA 7359 ALOMA AVENUE 7359 ALOMA AVENUE

WINTER PARK, FL 32792 US SUITE 100 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: DELIA ALVAREZ 01/03/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: ALMAWALI, KHOLOUD RODRIGUEZ-PINA, GEOVANNI J Name: Name: 7359 ALOMA AVENUE 7359 ALOMA AVENUE, SUITE 100 Address: Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

() Delete Title: VΡ Title: VΡ (X) Change () Addition Name:

TAVAREZ, ROSALYN Name: TAVAREZ, ROSALYN

7359 ALOMA AVENUE 7359 ALOMA AVENUE, SUITE 100 Address: Address: WINTER PARK, FL 32792 WINTER PARK, FL 32792 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition T/D () Delete T/D

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

7359 ALOMA AVENUE 7359 ALOMA AVENUE, SUITE 100 Address: Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

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 T/D 01/03/2008