2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000130112

Entity Name: MIRACRE CLEANING, INC.

FILED Apr 11, 2011 Secretary of State

| Entity Name. MIRACRE | E CLEANING, INC. | | | |
|--------------------------------------------------------------|----------------------------------|------------------------------------|-----------------------------------------|--|
| Current Principal Place | of Business: | New Principal Place of Business: | | |
| 5345 CORAL VINE LANE KISSIMMEE, FL 34758 | ! | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 5345 CORAL VINE LANE KISSIMMEE, FL 34758 | <u> </u> | | | |
| FEI Number: 56-2617214 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of C | Current Registered Agent: | Name and Address of | ne and Address of New Registered Agent: | |
| EDMOND, MARIE 5345 CORAL VINE LANE KISSIMMEE, FL 34758 | US | | | |
| The above named entity sin the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electron | nic Signature of Registered Age | ent | Date | |
| | | | | |
| | | | | |

OFFICERS AND DIRECTORS:

Title:

Name: SINEUS, JEAN C
Address: 5345 CORAL VINE LANE
City-St-Zip: KISSIMMEE, FL 34758

I hereby 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 all other like empowered.

SIGNATURE: JEAN SINEUS D 04/11/2011