2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000043003

HALLANDALE, FL 33009

City-St-Zip:

Entity Name: GBS MIRACLE, INC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
352 ANDALUSIA CORAL GABLES, FL 33334			308 MIRACLE MILE CORAL GABLES, FL	308 MIRACLE MILE CORAL GABLES, FL 33134	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	TH TERRACE ALE, FL 3300				
FEI Number:	: 65-0688269	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
1111 LINC MIAMI BEA The above	, MORTON R OLN ROAD #3 ACH, FL 3313 anamed entity of Florida.	325 9 US	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU		i- Oissantson of Desciolated Ass		Det	
Election Car		nic Signature of Registered Age g Trust Fund Contribution ().	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (BERN, KENNE 117 NW 9TH TI HALLANDALE,	ERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP (BERN, MARLA 117 NW 9TH T) Delete ERRACE	Title: Name: Address:	() Change () Addition	

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: KENNETH BERN PRES 03/25/2009