

# 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000003099

**FILED**  
**Apr 10, 2013**  
**Secretary of State**

**Entity Name:** GOD OF MIRACLES, INC.

**Current Principal Place of Business:**

6470 SW 9TH PL  
NORTH LAUDERDALE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

6470 SW 9TH PL  
NORTH LAUDERDALE, FL 33068

**New Mailing Address:**

**FEI Number:** 65-1299839

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MONTALVAN, RICARDO  
6470 SW 9TH PLACE  
NORTH LAUDERDALE, FL 33068 US

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

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: RICARDO MONTALVAN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MONTALVAN, RICARDO  
Address: 6470 SW 9TH PLACE  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: VP  
Name: MONTALVAN, SABI  
Address: 6470 SW 9TH PLACE  
City-St-Zip: NORTH LAUDERDALE, FL 33068

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SABI MONTALVAN

VP

04/10/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date