

No. C 207631		Due no later than Nov 30, 2017		Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. MIRACLES INC. MIRACLES INC. 639 N FOOTHILL RD IDAHO FALLS ID 83401		BARBARA DESHON 639 N FOOTHILL RD IDAHO FALLS ID 83401			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JOHNALEE MCDONALD	3785 E 109 N	IDAHO FALLS	ID		83401	
5. Organized Under the Laws of: ID C 207631		6. Annual Report must be signed.* Signature: Barbara DeShon Name (type or print): Barbara DeShon		Date: 09/18/2017 Title: agent			
Processed 09/18/2017		* Electronically provided signatures are accepted as original signatures.					