

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra S. Morahan
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 9:16

DOCUMENT # **257318** (6)

1. Corporation Name:
BISCAYNE BEDDING CORP

Principal Place of Business Mailing Address
4875 N W 37TH AVENUE 4875 N W 37TH AVENUE
MIAMI FL 33142 MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **03/27/1962** 3a. Date of Last Report **04/18/1994**

4. FEI Number **59-0966822** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MANDELL, ALAN
4875 N W 37TH AVENUE
MIAMI FL 33142

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the provisions of, Sections 607.0502 and 607.1508, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME **MANDELL, ALAN**
STREET ADDRESS **6745 S.W. 139 STREET**
CITY ST ZIP **MIAMI FL**
TITLE VD
NAME **MANDELL, STEPHEN A.**
STREET ADDRESS **8501 SW 82 TERRACE**
CITY ST ZIP **MIAMI FL**
TITLE STD
NAME **MANDELL, JEAN**
STREET ADDRESS **9609 S.W. 118TH AVE.**
CITY ST ZIP **MIAMI FL**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing, voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I authorize that the information indicated on this annual report or supplemental annual report or true and accurate and that my 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, required by Chapter 807, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report on an attached page with an address.

SIGNATURE: *ALAN MANDELL* **ALAN MANDELL** PRES. 3-23-95 633-4634
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR