

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002924

FILED  
Jan 06, 2010  
Secretary of State

Entity Name: JENNIFER CONVERTIBLES, INC.

**Current Principal Place of Business:**

417 CROSSWAYS PARK DRIVE  
WOODBURY, NY 11797

**New Principal Place of Business:**

**Current Mailing Address:**

417 CROSSWAYS PARK DRIVE  
WOODBURY, NY 11797

**New Mailing Address:**

FEI Number: 11-2824646      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ABADA, RAMI  
Address: 417 CROSSWAYS PARK DRIVE  
City-St-Zip: WOODBURY, NY 11797

Title: V  
Name: MATTLER, KEVIN  
Address: 417 CROSSWAYS PARK DRIVE  
City-St-Zip: WOODBURY, NY 11797

Title: V  
Name: FALCHOOK, LESLIE  
Address: 417 CROSSWAYS PARK DRIVE  
City-St-Zip: WOODBURY, NY 11797

Title: VD  
Name: SEIDNER, EDWARD B  
Address: 417 CROSSWAYS PARK DRIVE  
City-St-Zip: WOODBURY, NY 11797

Title: CEOD  
Name: GREENFIELD, HARLEY J  
Address: 417 CROSSWAYS PARK DRIVE  
City-St-Zip: WOODBURY, NY 11797

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: JOSEPH SCHILLERO

CONT

01/06/2010

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

\_\_\_\_\_ Date