

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058468

FILED
Apr 29, 2008
Secretary of State

Entity Name: U.S.A. BEDDING CORPORATION

Current Principal Place of Business:

275 EAST 10 AVE.
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

275 EAST 10 AVE.
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 20-1976990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JC APARICIO & ASSOCIATES, INC.
8900 SW 107 AVE., STE. #210
MIAMI, FL 33176 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 () Delete
Name: DAVID, MARIA
Address: 275 EAST 10 AVE.
City-St-Zip: HIALEAH, FL 33010

Title: VD () Delete
Name: FLORES, LIZANDRO
Address: 275 EAST 10 AVE.
City-St-Zip: HIALEAH, FL 33010

Title: SD () Delete
Name: MEDINA, LAURA
Address: 275 EAST 10 AVE.
City-St-Zip: HIALEAH, FL 33010

Title: TD () Delete
Name: FLORES, ENRIQUE
Address: 275 EAST 10 AVE.
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MARIA DAVID

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date