

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000943

FILED
Apr 27, 2004
Secretary of State

Entity Name: VIRGIN SLEEP SYSTEMS, INC.

Current Principal Place of Business:

3259 COMMERCIAL WAY
SPRING HILL, FL 34606

New Principal Place of Business:

#225 - 6252 COMMERCIAL WAY
WEEKI WACHEE, FL 34613

Current Mailing Address:

3259 COMMERCIAL WAY
SPRING HILL, FL 34606

New Mailing Address:

#225 - 6252 COMMERCIAL WAY
WEEKI WACHEE, FL 34613

FEI Number: 59-3640736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIVEIROS, WALTER
3259 COMMERCIAL WAY
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

VIVEIROS, WALTER
#225 - 6252 COMMERCIAL WAY
WEEKI WACHEE, FL 34613 US

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:

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: VIVEIROS, WALTER
Address: 3259 COMMERCIAL WAY
City-St-Zip: SPRING HILL, FL 34606

Title: WVC (X) Delete
Name: LOBERG, DWAYNE
Address: 3259 COMMERCIAL WAY
City-St-Zip: SPRING HILL, FL 34606

Title: D () Delete
Name: WILKINSON, JOHN
Address: 3259 COMMERCIAL WAY
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: VIVEIROS, WALTER
Address: #225 - 6252 COMMERCIAL WAY
City-St-Zip: WEEKI WACHEE, FL 34613

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

Title: D (X) Change () Addition
Name: WILKINSON, JOHN
Address: #225 - 6252 COMMERCIAL WAY
City-St-Zip: WEEKI WACHEE, FL 34613

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WALTER VIVEIROS

PC

04/27/2004

Electronic Signature of Signing Officer or Director

Date