

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000943

Entity Name: VIRGIN SLEEP SYSTEMS, INC.

FILED  
May 25, 2005  
Secretary of State

## Current Principal Place of Business:

#225 - 6252 COMMERCIAL WAY  
WEEKI WACHEE, FL 34613

## New Principal Place of Business:

7394 ST. ANDREWS BOULEVARD  
WEEKI WACHEE, FL 34613

## Current Mailing Address:

#225 - 6252 COMMERCIAL WAY  
WEEKI WACHEE, FL 34613

## New Mailing Address:

7394 ST. ANDREWS BOULEVARD  
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  
#225 - 6252 COMMERCIAL WAY  
WEEKI WACHEE, FL 34613 US

## Name and Address of New Registered Agent:

VRASPIR, TODD W ESQUIRE  
5327 COMMERCIAL WAY  
SUITE A101  
SPRING HILL, FL 34606 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: TODD W. VRASPIR

05/25/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/C (X) Change ( ) Addition  
Name: VIVEIROS, WALTER  
Address: 9472 WHISPER RIDGE TRAIL  
City-St-Zip: WEEKI WACHEE, FL 34613

Title: D (X) Change ( ) Addition  
Name: WILKINSON, JOHN  
Address: 3443 GRIFFIN VIEW DRIVE  
City-St-Zip: LADYLAKE, FL 32159

Title: D/P ( ) Change (X) Addition  
Name: CHICHESTER, BONNIE  
Address: 9375 BEARFOOT TRAIL  
City-St-Zip: WEEKI WACHEE, FL 34613

Title: D/ST ( ) Change (X) Addition  
Name: VRASPIR, TODD W  
Address: 5327 COMMERCIAL WAY, SUITE A101  
City-St-Zip: SPRING HILL, FL 34606

Title: D ( ) Change (X) Addition  
Name: BENNING, BERNARD  
Address: 4013 18TH STREET SW  
City-St-Zip: CALGARY ALBERTA CANADA, CA T2T4V6 CA

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

D/C

05/25/2005

Electronic Signature of Signing Officer or Director

Date