

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F81788

Entity Name: MATTRESS MART, INC.

FILED
Jun 19, 2009
Secretary of State

Current Principal Place of Business:

1301 WEST COPANS RD
STE F3
POMPANO BCH., FL 33064 US

New Principal Place of Business:

Current Mailing Address:

1301 WEST COPANS RD
SUITE A-4
POMPANO BCH., FL 33064

New Mailing Address:

FEI Number: 59-2199270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, ROBERT
831 SE 5TH AVE.
POMPANO BEACH, FL 33060 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, ROBERT
Address: 831 SE 5TH AVE
City-St-Zip: POMPAN0 BCH., FL

Title: S () Delete
Name: JOHNSON, SANDRA
Address: 831 SE 5TH AVE
City-St-Zip: POMPAN0 BCH., FL

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: JOHNSON WESLEY R
Address: 1231 NE 1ST STREET
City-St-Zip: POMPAN0 BEACH, FL 33060 US

Title: D () Change (X) Addition
Name: JOHNSON CHRIS A
Address: 831 SE 5TH AVENUE
City-St-Zip: POMPAN0 BEACH, FL 33060 US

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: ROBERT JOHNSON

P

06/19/2009

Electronic Signature of Signing Officer or Director

Date