

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2001 8:00 am
Secretary of State

08-15-2001 90001 047 ***558.75

DOCUMENT # F97000002637

1. Entity Name

GLOBAL MATTRESS & FURNITURE COMPANY

Principal Place of Business

2114 BOUQUET CT #201
 ORLANDO FL 32807

Mailing Address

2114 BOUQUET CT #201
 ORLANDO FL 32807

SAME

2. Principal Place of Business

2410 B NW 16th Ave

3. Mailing Address

3621 Turtle Run Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#1021

City & State
 Pompano Beach FL

City & State
 Coral Springs, FL

4. FEI Number

25-1791832

Applied For

Not Applicable

Zip
 33064

Country
 U.S.

Zip
 33067

Country
 U.S.

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GARCIA, ANTHONY R
 2114 BOUQUET CT #201
 ORLANDO FL 32807

Changed

7. Name and Address of New Registered Agent

Name
 Anthony R GARCIA

Street Address (P.O. Box Number is Not Acceptable)
 3621 Turtle Run Blvd #1021

City
 Coral Springs FL FL 33067

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-18-01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 P
 GARCIA, ANTHONY R
 2114 BOUQUET CT #201
 ORLANDO FL 32807 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V
 JOHNSON, ROBERT W
 3904 213 ST
 BAYSIDE NY 11361 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Anthony GARCIA ☒ Change ☐ Addition
 3621 Turtle Run Blvd #1021
 Coral Springs, FL 33067

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Robert Johnson ☒ Change ☐ Addition
 5326 NW 66th Ave
 Coral Spring FL 33067

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-18-01 954-7766777

CR2E034 (5/01)