2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G67039

1. Entity Name INTERNATIONAL BEDDING CORPORATION OF **ORLANDO**

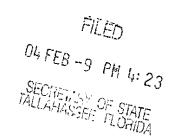


Mailing Address

DO NOT WRITE IN THIS SPACE

Principal Place of Business 730 W MCNAB ROAD FT LAUDERDALE, FL 33309

730 W MCNAB ROAD FT LAUDERDALE, FL 33309





CR2E034 (10/03) 01212004 No Chg-P

4. FEI Number 65-0229979 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required -----

954-968-2333

Daytime Phone #

6. Name and Address of Current Registered Agent

BERK, ARTHUR J. 848 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131

SIGNATURE:

DO NOT WRITE IN THIS SPACE

:					•
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD ELLMAN, J. LEON 730 W MCNAB ROAD FT. LAUDERDALE, FL 33309	· · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BERK, ARTHUR J. 730 W MCNAB ROAD FT. LAUDERDALE, FL			02/1	00028561617 2/0401038005 **1100.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELLMAN, NEIL 730 W MCNAB ROAD FT. LAUDERDALE, FL 33309	States and States and	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTAS SIROP, KEVIN 730 W MCNAB ROAD FT LAUDERDALE, FL 33309			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ELLMAN, LANCE 730 W MCNAB ROAD FT LAUDERDALE, FL 33309				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

Kevin