

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092691

Entity Name: MATTRESS CAPITAL, LLC

FILED
Jan 20, 2007
Secretary of State

Current Principal Place of Business:

108 SKYFLOWER CIRCLE
DAYTONA BEACH, FL 32117

New Principal Place of Business:

Current Mailing Address:

108 SKYFLOWER CIRCLE
DAYTONA BEACH, FL 32117

New Mailing Address:

FEI Number: 20-2045477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABBOTT, DALE J CPA
555 W. GRANADA BLVD., STE. E-9
ORMOND BEACH, FL 32174 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEVIN, DAVID
Address: 108 SKYFLOWER CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: MGRM () Delete
Name: LEVIN, CHRISTY
Address: 108 SKYFLOWER CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32117

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID LEVIN MGRM 01/20/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date