## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110137

BLACKMON, KEVIN L

5206 S FARKAS RD

PLANT CITY, FL 33567

Name:

Address:

City-St-Zip:

Entity Name: AUDIO SLEEP MATTRESS AND MORE, LLC

FILED Aug 01, 2007 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 5206 S FARKAS RD PLANT CITY, FL 33567 **Current Mailing Address: New Mailing Address:** 5206 S FARKAS RD PLANT CITY, FL 33567 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLACKMON, ERIKA R 5206 S FARKAS RD PLANT CITY, FL 33567 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: () Change () Addition

Name:

Address:

City-St-Zip:

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 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: KEVIN L BLACKMON MGR 08/01/2007