FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L36764

(3)

MATTRESS CENTER, INC.

appears in Block 12 or Block

SIGNATURE:

Principal Place of Business Mailing Address 2900 COUNTRY CLUB LANE S.W. 2900 COUNTRY CLUB LANE S.W. HALLANDALE FL 33009 HALLANDALE FL 33009-5104 3. Date Incorporated or Qualified 3a. Date of Last Report 01/25/1996 12/15/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2995788 21 26 Not Applicable Suito, Apt. #, etc. Suite, Apt. # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution [" 28 Added to Fees Zφ Country Country 2.0 8. This corporation has liability for intangible tax under s. 199,032. Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NILSEN, RICHARD B. Name 3050 W. HALLANDALE BEACH BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) HALLANDALE FL 33009 в3 **B4** City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Segrant x - 1yrins on proceed to minimal registered agent and fille if appropable (NOTE: Registered Agent is gnature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)THEF DELETE 11 TITLE Change Addition KATZ, SAM NAM: 12 NAME 2900 COUNTRY CLUB LN.S.W STREET ADDRESS 1.3 STREET ADDRESS HALLANDALE FL CITY - ST - ZIP 1.4 CITY - ST - ZIP vst DELETE TITLE 2.1 TITLE Change ___ Addition NILSEN, RICHARD NAME 2.2 NAME 2900 COUNTRY CLUB LN.S.W STREET ADDRESS 2.3 STREET ADDRESS HALLANDALE FL CITY - ST - ZIP 2 4 CITY - ST - ZIP DELETE TIT: F 3.1 TITLE Change Addition **NILSEN, RICHARD** 3.2 NAME 2900 COUNTRY CLUB LN.S.W STREET ADDRESS 3 3 STREET ADDRESS HALLANDALE FL CITY - ST - ZIP 3.4. CITY - ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - 7P 4.4 CITY - ST - ZIP Till F DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-20F 5.4 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 III. F NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7-P 64 CHTY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 portation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name