2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 07, 2006 8:00 am Secretary of State 03-07-2006 90002 048 ***158.75 DOCUMENT # P03000099121 1. Entity Name PERFORMANCE SLEEPWORKS, INC. 20013753 Principal Place of Business Mailing Address 10097 CLEARY BLVD. #289 10097 CLEARY BLVD. #289 PLANTATION, FL 33324 PLANTATION, FL 33324 CR2E034 (11/05) 03032006 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3775667 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLUM, DAVID DO NOT WRITE 10097 CLEARY BLVD SUITE 289 PLANTATION, FL 33324 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, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE BLUM, DAVID NAME STREET ADDRESS 10097 CLEARY BLVD. #289 PLANTATION, FL 33324 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE

is filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information he and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director and to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with the indicated on this report or supplemental eport is to of the corporation or the receiver or truchanged, or on an attachment with an

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED