2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109743

Entity Name: MIKE'S MATTRESS, INC.

FILED Apr 28, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

MIKES MATTRESS AND FURNITURE INC MIKES MATTRESS INC 23330 HARBORVIEW RD 23330 HARBORVIEW RD PORT CHARLOTTE, FL 33980 PORT CHARLOTTE, FL 33980

Current Mailing Address: New Mailing Address:

MIKES MATTRESS AND FURNITURE INC MIKES MATTRESS INC 23330 HARBORVIEW RD 23330 HARBORVIEW RD PORT CHARLOTTE, FL 33980 PORT CHARLOTTE, FL 33980

FEI Number: 20-1408583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BATTAGLIA, MICHAEL C BATTAGLIA, MICHAEL C MIKES MATTRESS AND FURNITURE INC MIKES MATTRESS INC 23330 HARBORVIEW RD 23330 HARBORVIEW RD PORT CHARLOTTE, FL 33980 US PORT CHARLOTTE, FL 33980 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: 04/28/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

Title: () Delete Title: (X) Change () Addition

BATTAGLIA, MICHAEL C BATTAGLIA, MICHAEL C Name: Name: 23330 HARBOR VIEW RD UNIT B 23330 HARBOR VIEW RD Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: PORT CHARLOTTE, FL 33980

VΡ Title: VΡ (X) Change () Addition Title: () Delete Name: BATTAGLIA, MICHAEL C Name: BATTAGLIA, MICHAEL C 23330 HARBORVIEW RD UNIT B 23330 HARBORVIEW RD Address: Address: PORT CHARLOTTE, FL 33980 PORT CHARLOTTE, FL 33980 City-St-Zip:

Title: Title: (X) Change () Addition () Delete

BATTAGLIA, MICHAEL C BATTAGLIA, MICHAEL C Name: Name: 2330 HARBORVIEW RD UNIT B 23330 HARBORVIEW RD Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: PORT CHARLOTTE, FL 33980

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL C. BATTAGLIA **PRES** 04/28/2009