

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162717

FILED  
Feb 20, 2007  
Secretary of State

Entity Name: BED BUGS BEDDING COMPANY

## Current Principal Place of Business:

1801 SOUTH TREASURE DRIVE, APT 117  
NORTH BAY VILLAGE, FL 33141

## New Principal Place of Business:

332 FERN DRIVE  
WESTON, FL 33326

## Current Mailing Address:

1801 SOUTH TREASURE DRIVE, APT 117  
NORTH BAY VILLAGE, FL 33141

## New Mailing Address:

332 FERN DRIVE  
WESTON, FL 33326

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PADILLA, MYRNA L DPT  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

PADILLA, MYRNA L DPT  
332 FERN DRIVE  
WESTON, FL 33326 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: MYRNA PADILLA

02/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: PADILLA, MYRNA  
Address: 1801 SOUTH TREASURE DRIVE, APT 117  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: DVS ( ) Delete  
Name: STRYPKO, SANDRA  
Address: 1801 SOUTH TREASURE DRIVE, APT 117  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: PADILLA, MYRNA  
Address: 332 FERN DRIVE  
City-St-Zip: WESTON, FL 33326

Title: DVS (X) Change ( ) Addition  
Name: STRYPKO, SANDRA  
Address: 332 FERN DRIVE  
City-St-Zip: WESTON, FL 33326

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 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: MYRNA PADILLA

DPT

02/20/2007

Electronic Signature of Signing Officer or Director

Date