2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113450

Entity Name: MIAMI FOAM INC.

FILED Mar 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4375 NW 128TH STREET OPA LOCKA, FL 33054 US

Current Mailing Address: New Mailing Address:

4375 NW 128TH STREET OPA LOCKA, FL 33054 US

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

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

 SOUZA, ANGELA M
 4375 NW 128TH STREET

 OPA LOCKA, FL 33054 US
 SOUZA, ANGELA M

 4375 NW 128TH STREET
 OPA LOCKA, FL 33054 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: ANGELA M SOUZA 03/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition Name: SOUZA, ANGELA M

 Address:
 4375 NW 128TH STREET
 Address:
 4375 NW 128TH STREET

 City-St-Zip:
 OPA LOCKA, FL 33054 US
 City-St-Zip:
 OPA LOCKA, FL 33054 US

Title: VP/D () Delete Title: () Change () Addition

 Name:
 SOUZA, RONI
 Name:

 Address:
 4375 NW 128TH STREET
 Address:

 City-St-Zip:
 OPA LOCKA, FL 33054 US
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 SOUZA, ELISA
 Name:

 Address:
 4375 NW 128TH STREET
 Address:

 City-St-Zip:
 OPA LOCKA, FL 33054 US
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 SOUZA, EDUARDO
 Name:

 Address:
 4375 NW 128TH STREET
 Address:

 City-St-Zip:
 OPA LOCKA, FL 33054 US
 City-St-Zip:

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: ANGELA M SOUZA P/D 03/15/2007