

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142373

FILED
May 17, 2007
Secretary of State

Entity Name: SLEEP AND SMILE COMFORT BED, INC.

Current Principal Place of Business:

5364 EHRLICH RD. STE. 175
TAMPA, FL 33624 US

New Principal Place of Business:

5121 EHRLICH RD.
STE. 104-B
TAMPA, FL 33624 US

Current Mailing Address:

5364 EHRLICH RD. STE. 175
TAMPA, FL 33624 US

New Mailing Address:

5121 EHRLICH RD.
STE. 104-B
TAMPA, FL 33624 US

FEI Number: 20-5861020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNIE, PHILIP
5364 EHRLICH RD.
STE. 175
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

BERNIE, PHILIP
5121 EHRLICH RD.
STE. 104-B
TAMPA, FL 33624 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:

05/17/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BERNIE, PHILIP
Address: 5364 EHRLICH RD. STE. 175
City-St-Zip: TAMPA, FL 33624

Title: CEO () Delete
Name: BERNIE, PHILIP
Address: 5364 EHRLICH RD. STE. 175
City-St-Zip: TAMPA, FL 33624

Title: SEC () Delete
Name: BERNIE, PHILIP
Address: 5364 EHRLICH RD. STE. 175
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BERNIE, PHILIP
Address: 16203 BRECKINMORE LANE
City-St-Zip: TAMPA, FL 33625

Title: CEO (X) Change () Addition
Name: BERNIE, PHILIP
Address: 16203 BRECKINMORE LANE
City-St-Zip: TAMPA, FL 33625

Title: SEC (X) Change () Addition
Name: BERNIE, PHILIP
Address: 16203 BRECKINMORE LANE
City-St-Zip: TAMPA, FL 33625

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: PHILIP BERNIE

PRES

05/17/2007

Electronic Signature of Signing Officer or Director

Date