2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 01, 2009
Secretary of State

DOCUMENT# P08000058288

Entity Name: THE GREATEST FURNITURE & MATTRESS STORE INC

Current Principal Place of Business:

7809 N DALE MABRY HWY
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

7809 N DALE MABRY HWY
TAMPA, FL 33614

New Mailing Address:

FEI Number: 26-2952403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SABEL, DAVID L
13613 LYTTON WAY
TAMPA, FL 336242540 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SABEL, DAVID L
Address: 13613 LYTTON WAY
City-St-Zip: TAMPA, FL 336242540

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SABEL, DAVID L
Address: 7809 NORTH DALE MABRY
City-St-Zip: TAMPA, FL 336242540 US

Title: S ( ) Change (X) Addition
Name: SABEL, THERESA H
Address: 7809 NORTH DALE MABRY
City-St-Zip: TAMPA, FL 33614 US

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: DAVID SABEL P 10/01/2009

Electronic Signature of Signing Officer or Director — Date