

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100653

FILED
Jan 20, 2009
Secretary of State

Entity Name: 1/2 PRICE MATTRESSES XII INC.

Current Principal Place of Business:

2033 NE 163RD ST
N MIAMI BCH, FL 33162

New Principal Place of Business:

2033 NE 163RD ST
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

2033 NE 163RD ST
N MIAMI BCH, FL 33162

New Mailing Address:

2033 NE 163RD ST
NORTH MIAMI BEACH, FL 33162

FEI Number: 26-3654422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALACIOS, LUCY
16969 NW 67TH AVE
SUITE 201
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

M & L ENTERPRISES ACCOUNTING AND ORE
16969 NW 67TH AVE
SUITE 201
HIALEAH, FL 33015 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: LUCY PALACIOS

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SESE, GISELLE
Address: 2033 NE 163RD ST
City-St-Zip: N MIAMI BCH, FL 33162

Title: VPD () Delete
Name: CARRENO, GILBERTO
Address: 2033 NE 163RD ST
City-St-Zip: N MIAMI BCH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: TABRAUE, BENJAMIN VPRES
Address: 2033 NE 163RD ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: GESELLE SESE

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date