

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000021442

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** BEDS, BEDS, BEDS OF MELBOURNE, INC.

**Current Principal Place of Business:**

2927/2945 WEST NEW HAVEN  
MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

2927/2945 WEST NEW HAVEN  
MELBOURNE, FL 32904

**New Mailing Address:**

FEI Number: 30-0543840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAURER, JANI E  
500 N.E. SPANISH RIVER BLVD  
SUITE 27  
BOCA RATON, FL 33431 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: PSD  
Name: JOHNSON, ROBERT A  
Address: 831 S.E. 5TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD  
Name: JOHNSON, SANDRA  
Address: 831 S.E. 5TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33060

I hereby 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 all other like empowered.

SIGNATURE: ROBERT JOHNSON

PSD

04/30/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date