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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000043575 (8)

HALLANDALE MATTRESS CORP.

FILED Jan 23 1998 8:00am Secretary of State



| Principal Place of Business 3050 WEST HALLANDALE BEACH BLVD. HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/18/1993 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 27 City & State City & State City & State 28 City & State 29 20 Country Applied For Suite, Apt. #, etc. City & State City & State 28 Country Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Added to Fees No 9. Name and Address of Current Registered Agent NILSEN, RICHARD B |
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| HALLANDALE FL 33009 HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/18/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0420127 Not Applied For Not Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State 28 Country Zip Country Zip Country Zip Country Added to Fees Trust Fund Contribution Added to Fees Added to Fees Added to Fees No 9. Name and Address of Current Registered Agent NILSEN, RICHARD B |
| DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/18/1993 2. Principal Place of Business 2a. Mailing Address 25 |
| 2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. Suite, Apt. #, etc. 3. Certificate of Status Desired Status Desired Fee Required 5. Certificate of Status Desired Status Desired Fee Required 6. Election Campaign Financing St.00 May Be Trust Fund Contribution Added to Fees 2. Zip Country Zip Country 2. Since This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent NILSEN, RICHARD B |
| 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Country 2c. Certificate of Status Desired 2c. Election Campaign Financing 2c. Election Campaign Financing 2c. Certificate of Status Desired 2c. Certificate of Status Desired 2c. Certificate of Status Desired 2c. Election Campaign Financing 2c. Certificate of Status Desired 2c. Election Campaign Financing 2c. Certificate of Status Desired 2c. Election Campaign Financing 2c. Certificate of Status Desired 2c. Certificate of Status Desired 2c. Certificate of Status Desir |
| 21 26 65-0420127 Not Applicate Suite. Apt. #, etc. Suite. Apt. #, etc. 22 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing Fee Required City & State 7. Country 7. Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NILSEN, RICHARD B |
| Suite, Apt. #, etc. 22 City & State City & State 28 City & State City & State 29 Country 20 Country 20 Country 20 Country 21 Country 22 Country 23 Country 24 Country 25 Country 26 Country 27 Country 28 Country 29 Country 29 Country 20 Country 20 Country 20 Country 21 Country 22 Country 23 Country 24 Country 25 Country 26 Country 27 Country 28 Country 29 Country 29 Country 20 Country 20 Country 20 Country 20 Country 21 Country 22 Country 23 Country 24 Country 25 Country 26 Country 27 Country 28 This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent NILSEN, RICHARD B |
| 27 5. Certificate of Status Desired Fee Required |
| City & State City & State City & State City & State G. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees Added to Fees Trust Fund Contribution Added to Fees Added to Fees State Stat |
| 23 |
| Zip Country Zip Country 24 25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent NILSEN, RICHARD B 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent 81 Name |
| 24 25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent NILSEN, RICHARD B 81 Name |
| 9. Name and Address of Current Registered Agent NILSEN, RICHARD B 81 Name Name |
| NILSEN, RICHARD B 81 Name |
| NILSEN, RIGHARD B |
| |
| 3050 W. HALLANDALE BEACH BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) |
| HALLANDALE FL 33009 |
| |
| 84 City 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. |
| SIGNATURE |
| Signature, typed or printed name of registered agent and litle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE P DELETE 1.1 TITLE Change Addition |
| NAME KATZ, SAM 1.2 NAME |
| STREET ADDRESS 3050 W HALLANDALE BEACH BLVD. 1.3 STREET ADDRESS |
| CITY-ST-ZIP HALLANDALE FL 33009 1.4 CITY-ST-ZIP |
| TITLE VST DELETE 2.1 TITLE Change Addition |
| NAME NILSEN, RICHARD 22 NAME |
| STREET ADDRESS 3050 W HALLANDALE BEACH BLVD. 2.3 STREET ADDRESS |
| CITY-ST-ZIP HALLANDALE FL 33009 2.4 CITY-ST-ZIP |
| TITLE DELETE 3.1 TITLE Change Addition |
| NAME 3.2 NAME |
| STREET ADDRESS 3.3 STREET ADDRESS |
| CITY-ST-ZIP 3.4. CITY-ST-ZIP |
| TITLE DELETE 4.1 TITLE Change Addition |
| NAME 4. 2 NAME |
| STREET ADDRESS 4.3 STREET ADDRESS |
| CITY-ST-ZIP 4.4 CITY-ST-ZIP |
| TRILE Change Additio |
| NAME 52 NAME |
| STREET ADDRESS 5.3 STREET ADDRESS |
| CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition |
| |
| NAME 6.2 NAME |
| STREET ADDRESS 6.3 STREET ADDRESS |
| CITY-SI-ZIP 6.4 CITY-SI-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information |

indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if change or on an attachment with an address.

(954) 961. 4054