2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000013426

Entity Name: CANNON PILLOWS CORPORATION

POMPANO BCH, FL 33069 US

City-St-Zip:

FILED Sep 06, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
4111-M4 CARRIAGE DR POMPANO BCH, FL 33069 US			4111 CARRIAGE DR M-4 POMPANO BCH, FL 3:		
Current M	lailing Addres	ss:	New Mailing Address:	New Mailing Address:	
C/O ALARCON 6595 N.W. 36TH ST, SUITE #116 MIAMI, FL 33166			4111 CARRIAGE DR M-4 POMPANO BEACH, FL		
FEI Number:	: 65-0500449	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
POMPANO The above	CARRIAGE DR O BCH, FL 33	069 US	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SALAS, JOSE A 4111-M4 CARE POMPANO BC	RIAGE DR H, FL 33069 US	Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address:	VSD (DE SALAS, AD 4111-M4 CARF		Title: (Name: Address:) Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSE SALAS D 09/06/2005