

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000093445 (2)
 1. Corporation Name
MIRALUX SLEEP PRODUCTS (WEST), INC.



Principal Place of Business 4940 W JEFFERSON PHOENIX AZ 85043 US	Mailing Address 730 WEST MCNAB ROAD FT. LAUDERDALE FL 33309
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/23/1994

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip	25 Country	28 Zip	30 Country

4. FEI Number
65-0566922

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

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

**GALLO, ROBIN
 C/O INTERNATIONAL BEDDING CORP
 730 MCNAB RD
 FT LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

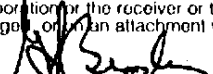
84 City **FL** 85 Zip Code

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 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ELLMAN, LEON J 730 WEST MCNAB ROAD FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	1.1 TITLE VP/Treasurer 1.2 NAME Gerald J. Brady 1.3 STREET ADDRESS 730 W. McNab Road 1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33309
TITLE	DVP DUANY, TONY 730 WEST MCNAB ROAD FT. LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE Secretary 2.2 NAME Arthur J. Berk 2.3 STREET ADDRESS 730 W. McNab Road 2.4 CITY-ST-ZIP Ft. Lauderdale, FL 33309
TITLE	ST BRADY, GERALD J 730 W MCNAB ROAD FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	3.1 TITLE Director/VP 3.2 NAME Lance Ellman 3.3 STREET ADDRESS 730 W. McNab Road 3.4 CITY-ST-ZIP Ft. Lauderdale, FL 33309
TITLE	DVP ELLMAN, NEIL 730 W MCNAB ROAD FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	4.1 TITLE Assistant Secretary 4.2 NAME Robin Gallo 4.3 STREET ADDRESS 730 W. McNab Road 4.4 CITY-ST-ZIP Ft. Lauderdale, FL 33309
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-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 changed or in an attachment with an address.

SIGNATURE:  **Gerald J. Brady** 3-16-98 (954) 977-3094

CP2E034 (10/97)