

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000015503

Entity Name: G. L. MATTRESS INC.

FILED  
Jan 27, 2007  
Secretary of State

## Current Principal Place of Business:

1600 CENTRAL FL PKWY  
ORLANDO, FL 32837 US

## New Principal Place of Business:

## Current Mailing Address:

1600 CENTRAL FL PKWY  
ORLANDO, FL 32837 US

## New Mailing Address:

FEI Number: 59-3450400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AVILES, LUIS  
530 BOHANNON BLVD  
ORLANDO, FL 32824 US

## Name and Address of New Registered Agent:

AVILES, LUIS A  
14650 CABLESHIRE WAY  
ORLANDO, FL 32824 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: LUIS A AVILES

01/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: AVILES, LUIS  
Address: 530 BOHANNON BLVD  
City-St-Zip: ORLANDO, FL 32824

Title: VP ( ) Delete  
Name: AVILES, GERALDO  
Address: 3621 OCITA DR  
City-St-Zip: ORLANDO, FL 32837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: AVILES, LUIS  
Address: 14650 CABLESHIRE WAY  
City-St-Zip: ORLANDO, FL 32824

Title: VP (X) Change ( ) Addition  
Name: AVILES, GERARDO  
Address: 3621 OCITA DR  
City-St-Zip: ORLANDO, FL 32837

I hereby certify that the information supplied with this filing does not qualify for the 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: LUIS A AVILES

PD

01/27/2007

Electronic Signature of Signing Officer or Director

Date