

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000002809

**Entity Name:** SLEEP GEEKZ INC

**Current Principal Place of Business:**

3740 ST JOHNS BLUFF RD SOUTH  
SUITE 8  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

3740 ST JOHNS BLUFF RD SOUTH  
SUITE 8  
JACKSONVILLE, FL 32224

**FEI Number:** 81-4959461

**Certificate of Status Desired:** Yes

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

SWENSON, JOSH D  
3740 ST JOHNS BLUFF RD SOUTH  
SUITE 8  
JACKSONVILLE, FL 32224 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SWENSON, JOSH D  
Address 3740 ST JOHNS BLUFF RD SOUTH  
SUITE 8  
City-State-Zip: JACKSONVILLE FL 32224

Title COO  
Name SALTINK, SHANE D  
Address 3740 ST JOHNS BLUFF RD SOUTH  
SUITE 8  
City-State-Zip: JACKSONVILLE FL 32224

Title CFO  
Name MILLER, CHRISTIAN  
Address 3740 ST JOHNS BLUFF RD SOUTH  
SUITE 8  
City-State-Zip: JACKSONVILLE FL 32224

*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:** CHRISTIAN MILLER

CFO

02/12/2021

Electronic Signature of Signing Officer/Director Detail

Date