


FILED
May 06, 2004 8:00 am
Secretary of State

05-06-2004 90176 021 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000047876	
1. Entity Name NAILS BY CREATIVE, INC.	

Principal Place of Business 3160 SW 13 STREET #2 MIAMI, FL 33145	Mailing Address 3160 SW 13 STREET #2 MIAMI, FL 33145
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04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1129805	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**IZAQUIRRE, NIMIAN F
3160 SW 13 STREET #2
MIAMI, FL 33145**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *N. Izaquirre* DATE: 4/26/04

Signature typed or printed name of registered agent and list if applicable. (NOTE: Registered Agents signature required when registering)

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$350.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IZAQUIRRE, NIMIAN F 3160 SW 13 STREET #2 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CABAL-RIERA, LOURDES Y 3160 SW 13 STREET #2 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUGO, CANDIDA M 3160 SW 13 STREET #2 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BASULTO, ROSA M 3160 SW 13 STREET #2 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: *N. Izaquirre* DATE: 4/26/04 305/8287388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR