

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020415

FILED
May 01, 2009
Secretary of State

Entity Name: TAMI NAILS, INC.

Current Principal Place of Business:

1670 EHWY 50
SUITE C
CLERMONT, FL 34711

New Principal Place of Business:

5230 SW 34TH STREET
GAINESVILLE, FL 32608

Current Mailing Address:

1698 RACHEL RIDGE LOOP
OCOEE, FL 34761

New Mailing Address:

FEI Number: 05-0561382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGUYEN, TAM T
1698 RACHEL RIDGE LOOP
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NGUYEN, TAM T
Address: 1698 RACHEL RIDGE LOOP
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TAM NGUYEN

MGR

05/01/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date