

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071949

Entity Name: NAIL SUPPLY ETC, INC

FILED  
Mar 27, 2009  
Secretary of State

## Current Principal Place of Business:

236 SW PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34984

## New Principal Place of Business:

## Current Mailing Address:

236 SW PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34984

## New Mailing Address:

FEI Number: 26-3057337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LE, TRANG  
2279 SW NEWPORT ISLES BLVD  
PORT ST. LUCIE, FL 34953 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LE, TRANG  
Address: 2279 SW NEWPORT ISLE BLVD  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VP ( ) Delete  
Name: INTHAPHONE, OULAY  
Address: 403 GREENBRIAR DR, APT 112  
City-St-Zip: NORMAL, IL 61761

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: INTHAPHONE, OULAY  
Address: 28 HARBOUR ISLE DRIVE WEST  
City-St-Zip: FT. PIERCE, FL 34949

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: TRANG LE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

03/27/2009

\_\_\_\_\_  
Date