

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000051225

**Entity Name:** ST JOHNS NAIL SPA INC

**Current Principal Place of Business:**

140 LITTLE CYPRESS DR  
STE 104  
ST JOHNS, FL 32259

**Current Mailing Address:**

140 LITTLE CYPRESS DR  
STE 104  
ST JOHNS, FL 32259 US

**FEI Number:** 88-2921909

**Certificate of Status Desired:** Yes

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

PHAN & PHAN PA  
6100 GREENLAND RD  
STE 404  
JACKSONVILLE, FL 32258 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 NGUYEN, MINH C  
Address 140 LITTLE CYPRESS DR STE 404  
City-State-Zip: ST JOHNS FL 32259

Title VP  
Name NGUYEN, RYAN  
Address 140 LITTLE CYPRESS DR STE 404  
City-State-Zip: ST JOHNS FL 32259

*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:** MINH NGUYEN

P

03/27/2025

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date