

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000009541

**Entity Name:** A-Z NAILS & SPA LLC

**Current Principal Place of Business:**

13510 S TAMIAMI TRAIL N  
SUITE 8  
NAPLES, FL 34110

**Current Mailing Address:**

13510 S TAMIAMI TRAIL N  
SUITE 8  
NAPLES, FL 34110 US

**FEI Number:** 45-4449206

**Certificate of Status Desired:** No

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

NGUYEN, DANIEL P  
10491 SIX MILE CYPRESS PKWY  
STE 244  
FORT MYERS, FL 33966 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

**Authorized Person(s) Detail :**

Title MGR  
Name LE, VU Q  
Address 1032 MANOR LAKES DR APT. D202  
City-State-Zip: NAPLES FL 34110

Title MGRM  
Name PHAM, TRINA  
Address 1032 MANOR LAKES DR. APT.D202  
City-State-Zip: NAPLES FL 34110

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** VU LE

**MGR**

**02/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date