

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000079275

Entity Name: VAN SPA & NAILS LLC

Current Principal Place of Business:

919 LAKELAND PARK CENTER DRIVE
364
LAKELAND, FL 33809

Current Mailing Address:

919 LAKELAND PARK CENTER DR
364
LAKELAND, FL 33809 US

FEI Number: 47-1086197

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LE, KEVIN
11484 SW 10 CT
DAVIE, FL 33325 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 NGUYEN, BAO
Address 919 LAKELAND PARK CENTER DRIVE
364
City-State-Zip: LAKELAND FL 33809

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: NGUYEN, BAO

MANAGER

03/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date