

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000192227

**Entity Name:** LK NAILS SPA LLC

**Current Principal Place of Business:**

21175 BISCAYNE BLVD  
AVENTURA, FL 33180

**Current Mailing Address:**

21175 BISCAYNE BLVD  
AVENTURA, FL 33180 US

**FEI Number:** 47-2578700

**Certificate of Status Desired:** No

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

SUPERBIZ REGISTERED AGENT, INC.  
2761 VISTA PKWY UNIT E4  
WEST PALM BEACH, FL 33411 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 AMBR  
Name NGUYEN, VINH T  
Address 13763 NW 15TH STREET  
City-State-Zip: PEMBROKE PINES FL 33028

Title AMBR  
Name VO, LARRY  
Address 13763 NW 15TH STREET  
City-State-Zip: PEMBROKE PINES FL 33028

*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:** VINH NGUYEN

**PRESIDENT**

**02/19/2015**

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

\_\_\_\_\_  
Date