

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000075425

Entity Name: PLUSH NAILS & DAY SPA, LLC

Current Principal Place of Business:

1724 S DALE MABRY HWY
TAMPA, FL 33629

Current Mailing Address:

594 LAKE CYPRESS CIRCLE
TAMPA, FL 34677

FEI Number: 82-1138266

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NGUYEN, VAN T
594 LAKE CYPRESS CIRCLE
TAMPA, FL 34677 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 MRGM
Name ORTIZ, QUYNH
Address 7200 N GLEN AVENUE
City-State-Zip: OLDSMAR FL 33614

Title AMBR
Name VO, KIM C
Address 594 LAKE CYPRESS CIRCLE
City-State-Zip: OLDSMAR FL 34677

Title AMBR
Name NGUYEN, SYDNEY H
Address 1944 S ORANGE AVENUE
City-State-Zip: WEST COVINA CA 91790

Title AMBR
Name VO, PETER V
Address 103 TIGNOR CT
City-State-Zip: CENTERVILLE GA 31028

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: KIM VO

AMBR

03/07/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date