

**2019 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:**

1650 MARGARET STREET  
STE 302-229  
JACKSONVILLE, FL 32204 US

**FEI Number:** 82-1138266

**Certificate of Status Desired:** Yes

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

GREEN, RONALD  
1650 MARGARET STREET  
STE 302-229  
JACKSONVILLE, FL 32204 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:** RONALD GREEN

01/04/2019

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 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

Title ADMINISTRATIVE MANAGER  
Name GREEN, RONALD  
Address 1650 MARGARET STREET  
STE 302-229  
City-State-Zip: JACKSONVILLE FL 32204

*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:** RONALD GREEN

ADMINISTRATIVE  
MANAGER

01/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date