## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90117 031 \*\*\*158.75

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## DOCUMENT # G27020

REAL NAILS, INC.

Principal Place of Business Mailing Address					 	HANTATATZ ATANCAL	184 BIBI B1811 IN BANKA
Real Nails Inc. Real Nails Inc.							
Ì <b>i</b> 97	9791 Sunset Dr. 9791 Sunset Dr.		- 1		DO NOT WRITE IN	THIS SPACE	
Mian	Miami, FL 33173-4615 Miami, FL 33173-461		.5		3. Date Incorporated or Qualifed		
			03/09/1983				
2. Principal Place of Business 2a. Mailing Address			100		4. FEI Number Applied For		Applied For
21	26		. ചെടുമ കേക്ത്ര		59-2285546		Not Applicable
	Real Nails Inc. Sui Real Nails		ls Inc.		5. Certifcate of Status Desired	•	5 Additional
22	9791 Sunset Dr. lami, FL 33173-4615	27   9791 Sunse			or defined of childs besied		Required
Mi	amı, FL 33113-1010			5	6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution	<del></del>	ed to Fees
Zip	Country	——————————————————————————————————————	ountry		<ol> <li>This corporation owes the current year Personal Property Tax.</li> </ol>	ar Intangible ☐ Yes	□No
24 25 29 30 30 9. Name and Address of Current Registered Agent			<del>-</del>		10. Name and Address of New Registe		
<u> </u>	v. Name and Address of Carro	it tragional out in the second	81 N	ame			
CALL	LEJAS, GUSTAVO	-	20 0		(D.O. Boy Number in Net Acceptable)		
Real Nails Inc.			<b>82</b>   S	treet Addres	ss (P.O. Box Number is Not Acceptable)	•	
<b>i</b> .	9791 Sunset Dr.		83				
	Miami, FL 33173-4615		84 C	ihi		85 Zi	ip Code
<u> </u>		-		ity		FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered							
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
	Signature, typed or printed name of registered ager	<del></del>		ature required v	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	S AND DIREC	TORS IN 12
12.		ND DIRECTORS 13	TITLE		ADDITIONS/CHANGES TO OFFICER	☐ Chang	
NAME	D Callejas, Luz Marina L D		NAME				· - ·
STREET ADDRESS	12356 S W 119TH TR	•	STREET ADD	nress			
CITY-ST-ZIP	MIAMI, FL 00000		CITY-ST-ZIP				1
TITLE	DP		TITLE		<u> </u>	Chang	ge Addition
NAME	CALLEJAS, GUSTAVO	2.2	NAME				
STREET ADDRESS	12356 S W 119TH TR	2.3	STREET ADD	DRESS			
CITY-ST-ZIP	MIAMI, FL 00000	2.4	4 CITY-ST-ZII	Р			
TITLE		☐ DELETE 3.1	TITLE			Chang	ge 🗌 Addition
NAME		32	NAME				}
STREET ADDRESS		3.3	STREET ADD	RESS			
CITY-ST-ZIP	·	3.4	. CITY-ST-ZI	P			
TITLE		☐ DELETE 4.1	TITLE			Chang	ge 🔲 Addition
NAME			2 NAME				
STREET ADDRESS		4.3	STREET ADD	DRESS			
CITY-ST-ZIP			CITY-ST-ZIF	·		- Chan	a ddilla
. TILE . , ===	remaining the second of the second	# #	TITLE.		and the second s	Chang	ge Addition -
NAME			NAME	DECC			
STREET ADDRESS		1	STREET ADD				ļ
CITY-ST-ZIP			CITY-ST-ZIF	<u> </u>		☐ Chang	ge Addition
TITLE			NAME				
NAME			STREET ADD	DRESS			{
STREET ADDRESS		0.3			•		l

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on the analysis of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on the analysis of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/99

Davtime Phone #