FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J64594** **(1)**

1. Corporation Name
JUST NAILS, INC.

Principal Place of Business	Mailing Address
1155 PASADENA AVENUE SOUTH SOUTH PASADENA FL 33707	1155 PASADENA AVENUE SOUTH SOUTH PASADENA FL 33707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/23/1987
3a. Date of Last Report: 08/17/1994

2. Principal Place of Business
21: 1155 Pasadena Ave S
22 Suite, Apt. #, etc.: E-1
23 City & State: S. Pasadena Fl
24 Zip: 33707
25 County: Pinellas

2a. Mailing Address
26: Same as above
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 County

4. FEI Number: 59-2807588 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PAYNE, VICKY LYN
625 79TH CIR. S.
ST PETERSBURG FL 33707

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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: Vicky L. Payne — Vicky L. Payne - President — 4-25-95
(Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when mandatory) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	11 TITLE	☐ Change ☐ Addition
NAME	VANDAVEER, DEBORAH D.	12 NAME	
STREET ADDRESS	6011 3RD ST SO.	13 STREET ADDRESS	
CITY-ST-ZIP	ST PETE FL	14 CITY-ST-ZIP	
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	PAYNE, VICKY LYN	22 NAME	
STREET ADDRESS	6326 BAHAMA SHORES DR	23 STREET ADDRESS	
CITY-ST-ZIP	ST. PETE FL 33705	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, or on an attachment with an address.

SIGNATURE: Vicky L Payne — 5-8-95 — 813-347-7230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0907741 CP