

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 04, 2004 8:00 am**  
**Secretary of State**

08-04-2004 90020 010 \*\*\*150.00

**DOCUMENT # K16366**

1. Entity Name  
ISABELLA NAIL SALON, INC.



Principal Place of Business

19826 WEST DIXIE HWY  
MIAMI, FL 33180 US

Mailing Address

19826 WEST DIXIE HWY  
MIAMI, FL 33180 US



07072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

23-0032717

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

MIRANDA, ISABEL  
18935 W DIXIE HWY  
N MIAMI, FL 33180

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
AGUAS, LESLIE P  
19826 WEST DIXIE HWY  
MIAMI, FL 33180

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

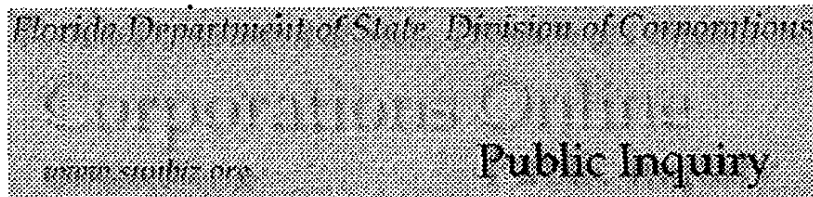
**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/30/04 305 9372057



Attachment  
26/078334

## Florida Profit

### ISABELLA NAIL SALON, INC.

#### PRINCIPAL ADDRESS

19826 WEST DIXIE HWY  
MIAMI FL 33180 US  
Changed 07/20/2000

#### MAILING ADDRESS

19826 WEST DIXIE HWY  
MIAMI FL 33180 US  
Changed 07/20/2000

**Document Number**  
K16366

**FEI Number**  
230032717

**Date Filed**  
02/29/1988

**State**  
FL

**Status**  
ACTIVE

**Effective Date**  
NONE

**Last Event**  
AMENDMENT

**Event Date Filed**  
07/20/2000

**Event Effective Date**  
NONE

## Registered Agent

Name & Address
MIRANDA, ISABEL 18935 W DIXIE HWY N MIAMI FL 33180
Name Changed: 04/28/1997
Address Changed: 04/28/1997

## Officer/Director Detail

Name & Address	Title
AGUAS, LESLIE P 19826 WEST DIXIE HWY MIAMI FL 33180	PSTD

Annual Reports

24678334  
#K16366

Report Year	Filed Date
2001	04/24/2001
2002	04/29/2002
2003	04/24/2003

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[05/01/1996 -- 1996 ANNUAL REPORT](#)

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

[Corporations Inquiry](#)

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Attachment  
24678334  
HK163166

To the Division of Corporations:

My name is Leslie P. Aguas, officer of Isabella's Nail Salon. I write you in concern of my corporation renewal. I never got the renewal papers but I got the notice of late charge. I have never been late before, you can review my history of payments. You are going to see that I am always on time. I already talk to somebody in you office who inform me to send an explanation letter with the application and the late charge would not be applied. Thank you for attention in this matter,



LESLIE P. AGUAS