

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024149

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** LACE NAIL SPA, LLC

**Current Principal Place of Business:**

1935 WEST AVE STE 105  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

1521 ALTON RD. #112  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

**FEI Number:** 41-2059342      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

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

GORDH, ANNA E  
801 NORTH VENETIAN DR.  
205  
MIAMI BEACH, FL 33139 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: ANNA E GORDH

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GORDH, ANNA E  
Address: 1521 ALTON RD. #112  
City-St-Zip: MIAMI BEACH, FL 33139 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ANNA E. GORDH

MS.

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date