

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033915

Entity Name: OCEAN NAILS LLC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

1598 S. COUNTY HWY 393 SUITE 104
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

1598 S. COUNTY HWY 393
SUITE 104
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

1598 S. COUNTY HWY 393 SUITE 104
SANTA ROSA BEACH, FL 32459

New Mailing Address:

1598 S. COUNTY HWY 393
SUITE 104
SANTA ROSA BEACH, FL 32459

FEI Number: 26-2259872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LE, STEVEN C
176 TROPICAL WAY
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LE, STEVEN C
Address: 176 TROPICAL WAY
City-St-Zip: FREEPORT, FL 32439

Title: MGRM () Delete
Name: LE, THANG Q
Address: 233 CLUB HOUSE DR E
City-St-Zip: FREEPORT, FL 32459

ADDITIONS/CHANGES:

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

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: STEVEN LE

MGRM

04/24/2009

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