

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000081170

**FILED**  
**Mar 26, 2011**  
**Secretary of State**

**Entity Name:** AQUASTONE NAILS & SPA, LLC

**Current Principal Place of Business:**

411 SOUTH BELCHER ROAD  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

411 SOUTH BELCHER RD  
CLEARWATER, FL 33765

**New Mailing Address:**

411 SOUTH BELCHER ROAD  
CLEARWATER, FL 33765 US

**FEI Number:** 26-3233157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THACH, SUOL T  
411 SOUTH BELCHER ROAD  
CLEARWATER, FL 33765 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  
**Name:** THACH, SUOL T  
**Address:** 411 SOUTH BELCHER ROAD  
**City-St-Zip:** CLEARWATER, FL 33765 US

**Title:** MGRM  
**Name:** THACH, LYNDIA  
**Address:** 1145 ALHAMBRA WAY S  
**City-St-Zip:** ST PETERSBURG, FL 33705 US

I hereby 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:** SUOL THACH

MNG

03/26/2011

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