

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000055641

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** TOES & TIPS NAIL SPA LLC.

**Current Principal Place of Business:**

8762 W. FLAGLER STREET  
MIAMI, FL 33174

**New Principal Place of Business:**

**Current Mailing Address:**

8762 W. FLAGLER STREET  
MIAMI, FL 33174

**New Mailing Address:**

**FEI Number:** 27-0339210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHRISTIANSEN, JACKEY  
9762 W. FLAGLER STREET  
MIAMI, FL 33174 US

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

CHRISTIANSEN, JACKEY  
8762 W. FLAGLER STREET  
MIAMI, FL 33174 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: JACKEY CHRISTIANSEN

01/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM

**Name:** CHRISTIANSEN, JACKEY

**Address:** 9619 FONTAINEBLEAU BLVD # 612

**City-St-Zip:** MIAMI, FL 33172

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: JACKEY CHRISTIANSEN

MGRM

01/19/2012

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