

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000090532

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** PRESTIGE HAIR & NAIL SPA, LLC

**Current Principal Place of Business:**

1833 SW 8TH STREET  
MIAMI, FL 33135 US

**New Principal Place of Business:**

**Current Mailing Address:**

1833 SW 8TH STREET  
MIAMI, FL 33135 US

**New Mailing Address:**

**FEI Number:** 27-0973494

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAKHANI, SEEMA S MANAGER  
18201 SW 52ND CT  
SOUTH WEST RANCHES, FL 33331 US

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

LAKHANI, SEEMA S  
18201 SW 52ND CT  
SOUTH WEST RANCHES, FL 33331 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:** SEEMA

04/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LAKHANI, SEEMA S  
**Address:** 18201 SW 52ND CT  
**City-St-Zip:** SOUTH WEST RANCHES, FL 33331 US

**Title:** MGR  
**Name:** LAKHANI, SUMAIRA S  
**Address:** 18201 SW 52NC CT  
**City-St-Zip:** SOUTH WEST RANCHES, FL 33331 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:** SEEMA

MGR

04/28/2012

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