

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000049945

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** ANGEL NAILS AND SPA EXPERT LLC

**Current Principal Place of Business:**

1164 WESTON RD  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1164 WESTON RD  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 80-0574504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANGEL NAILS AND SPA  
1164 WESTON RD  
WESTON, FL 33326 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: MGR  
Name: VAN, MICHELE  
Address: 1164 WESTON RD  
City-St-Zip: WESTON, FL 33326

Title: MGRM  
Name: TRUONG, ROGIO  
Address: 1164 WESTON RD  
City-St-Zip: WESTON, FL 33326

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: ROGIO TRUONG

MGR

04/21/2011

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