

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000051783

FILED
May 05, 2011
Secretary of State

Entity Name: TAMI NAILS AND SPA LLC

Current Principal Place of Business:

2075 E OSCEOLA PKWY
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

2075 E OSCEOLA PKWY
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 27-2560327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LE, HA T
14699 CABLESHIRE WAY
ORLANDO, FL 32824 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: LE, HA T
Address: 14699 CABLESHIRE WAY
City-St-Zip: ORLANDO, FL 32824

Title: MGR
Name: PHAN, THUY B
Address: 14699 CABLESHIRE WAY
City-St-Zip: ORLANDO, FL 32824

Title: MGR
Name: PHAN, THUY BICH
Address: 14699 CABLESHIRE WAY
City-St-Zip: ORLANDFO, FL 32824

Title: MGR
Name: PHAN, THUY BICH
Address: 14699 CABLESHIRE WAY
City-St-Zip: ORLANDFO, FL 32824

Title: MGR
Name: PHAN, THUY BICH
Address: 14699 CABLESHIRE WAY
City-St-Zip: ORLANDFO, FL 32824

Title: MGR
Name: PHAN, THUY BICH
Address: 14699 CABLESHIRE WAY
City-St-Zip: ORLANDFO, FL 32824

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: LE HA TUAN

MGRM

05/05/2011

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