

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000119158

**Entity Name:** DIVA NAILS & SPA II LLC

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4937 SR 64 E  
BRADENTON, FL 34208

**New Principal Place of Business:**

4615 CORTEZ RD W UNIT 4615  
BRADENTON, FL 34210

**Current Mailing Address:**

4937 SR 64 E  
BRADENTON, FL 34208

**New Mailing Address:**

4615 CORTEZ RD W UNIT 4615  
BRADENTON, FL 34210

**FEI Number:** 45-4834594

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRAN, CHRISTIAN H  
3446 58TH AVE N  
ST PETERSBURG, FL 33714 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: TRAN, CHRISTIAN H  
Address: 3446 58TH AVE N  
City-St-Zip: ST PETERSBURG, FL 33714

Title: MGRM  
Name: LE, LEHOA T  
Address: 5227 60TH DRIVE E  
City-St-Zip: BRADENTON, FL 34203

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: LEHOA LE

MGRM

03/20/2012

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