

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005517

Entity Name: 10MINMANICURE LLC

FILED
May 17, 2007
Secretary of State

Current Principal Place of Business:

20185-B NE 16TH PLACE
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

20185-B NE 16TH PLACE
MIAMI, FL 33179

New Mailing Address:

FEI Number: 20-2271031 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

O'NEIL, LORRAINE B
701 SE 6 STREET
FT. LAUDERDALE, FL 33301 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GHERMEZIAN, SYD
Address: 9510 W. SAHARA, SUITE 200
City-St-Zip: LAS VEGAS, NV 89117

Title: MGR () Delete
Name: O'NEIL, LORRAINE B
Address: 20185-B NE 16 PLACE
City-St-Zip: MIAMI, FL 33179

Title: MGR () Delete
Name: JIMENEZ, VIVIAN
Address: 20185-B NE 16 PLACE
City-St-Zip: MIAMI, FL 33179

Title: MGR () Delete
Name: JANSON, KAREN
Address: 20185-B NE 16 PLACE
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: VIVIAN JIMENEZ

MS.

05/17/2007

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