

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90009 036 ***150.00

DOCUMENT # P000,00009460

1. Entity Name
MILLENNIUM NAILS PLUS TAN, INC.



Principal Place of Business
2120 SAXON BLVD
UNIT 204
DELTONA, FL 32725

Mailing Address
141 CLOISTER COVE
CASSELBERRY, FL 32707

54063365



2. Principal Place of Business
2120 SAXON BLVD

3. Mailing Address
2120 SAXON BLVD

07122004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.
Unit 204

Suite, Apt. #, etc.
204

City & State
Deltona FL

City & State
Deltona FL

4. FEI Number
59-3627459

Applied For
Not Applicable

Zip
32725

Country
Volucida

Zip
32725

Country
Volucida

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HONG, TOM
2120 SAXON BLVD #204
DELTONA, FL 32725

Name
Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D HOANG, TOM 3840 SOUTH ORLANDO DRIVE SANFORD, FL 32773

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D NHU PHU, LIEN 3840 SOUTH ORLANDO DRIVE SANFORD, FL 32773

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

524063365-

Millennium Nails Plfts Tan, Inc.
2120 Saxon Blvd., #204
Deltona, FL 32725

#P00000009460

Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314-6198

July 7, 2004

Re. 2004 Annual Report

Dear Division of Corporations,

We received your postcard today saying that we did not file our 2004 Corporate Annual Report. However, this was the first notice we received from you. Please waive the \$400.00 penalty and accept our \$150.00 payment for the 2004 Corporate Annual Report. Thank you.

Sincerely,



Tom Hoang, President