

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

3/4

FILED
Mar 25, 2008 8:00 am
Secretary of State

03-04-2008 90019 002 ***150.00

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1st MOORE CR2E034 (10/07)

DOCUMENT # P01000056909 1. Entity Name THE NAILS CLUB, INC.																													
Principal Place of Business 3050 ALAFAYA TRAIL 1028 OVIEDO FL 32765			Mailing Address 3050 ALAFAYA TRAIL 1028 OVIEDO FL 32765																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State Zip Country		City & State Zip Country		4. FE# Number 59-3722261 Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent DUNG, DUNG - 2000 CITRUS COVE DR OVIEDO FL 32765																											
7. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, typed or printed name of registered agent and title. (Required) (NOTE: Registered Agent's signature required when not state agent)																											
FILE NOW!!! - FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PSD</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>DUNG, TRUONG</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8112 PAMLICO STREET</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>ORLANDO FL 32817</td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 10%; text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	PSD	☐ Delete	NAME	DUNG, TRUONG		STREET ADDRESS	8112 PAMLICO STREET		CITY - ST - ZIP	ORLANDO FL 32817		TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 firm empowered.																													
SIGNATURE: <u><i>TDUNG</i></u> 03/17/08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													