

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095370

Entity Name: ODYSSEY NAIL SYSTEMS, INC.

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

4424 SEA BOARD RD  
SUITE F  
ORLANDO, FL 32808 US

## New Principal Place of Business:

## Current Mailing Address:

4424 SEABOARD RD  
SUITE F  
ORLANDO, FL 32808 US

## New Mailing Address:

FEI Number: 59-3747440      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LUU, VAN  
4424 SEABOARD RD  
SUITE F  
ORLANDO, FL 32808 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: LUU, VAN  
Address: 4424 SEABOARD RD, SUITE F  
City-St-Zip: ORLANDO, FL 32808

Title: CEO ( ) Delete  
Name: NGUYEN, TRANG D  
Address: 4424 SEABOARD RD, SUITE F  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VAN LUU

PSTD

04/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date