Entity Name NICE NAILS, IN(Principal Place of Busin B300 W. 84 STREET B6 HALEAH, FL 33018 Principal Place of Bu Suite. Apt. #, etc. City & State Zip 6. Nam CHEUNG, KANA B300 W. 84 STRE B6 HALEAH, FL 330 SIGNATURE SIGNATURE FILE NOW After May 1, 20 II.LE AME STREET ADDRESS IITY-ST-ZIP II.LE AME TREET ADDRESS IITY-ST-ZIP II.LE AME TREET ADDRESS IITY-ST-ZIP II.LE III.E IIII.E III.E	US Isiness Country me and Address of Current f ET 18 ntity submits It is statement for	Mailing Address 3300 W. 84 STREET B6 HIALEAH, FL 33018 3. Mailing Address Suite, Apt. #, etc. City & State Zip Registered Agent	Coun	Name Street Address (I City ed office or register	04-3 04222004 C 4. FEI Number -14-1857984 5. Certificate of State 7. Name and Addre P.O. Böx Number is No	66424 hg-P us Desired as of New Regi	CR2E034 (10/03)	.00 pplied For the Applicable
BOOW. 84 STREET BOOMERS STREET BOOMERS STREET BOOMERS SUBJECT ADDRESS STREET ADDRESS	US Isiness Country me and Address of Current f ET 18 ntity submits this statement for gistered agent.	3300 W. 84 STREET B6 HIALEAH, FL 33018 3. Mailing Address Suite, Apt. #, etc. City & State Zrp Registered Agent the purpose of changing i	its (egistero	Name Street Address (I City ed office or register	04222004 C 4. FEI Number -14-1857984 5. Certificate of State 7. Name and Addre (P.O. Box Number is No	hg-P us Desired as of New Regi at Acceptable)	CR2E034 (10/03)	e
IALEAH, FL 33018 IALEAH, FL 33018 Principal Place of Bu Suite. Apt. #, etc. City & State Zip 6. Nei CHEUNG, KANA 300 W. 84 STRE 36 IALEAH, FL 330 File NOW After May 1, 20 0. File NOW After May 1, 20 0. File NOW After May 1, 20 0. TUE AME TREET ADDRESS ITV-ST-ZIP TUE AME TREET ADDRESS	Usiness Country The and Address of Current for thity submits this statement for gistered agent.	HIALEAH, FL 33018 3. Mailing Address Suite, Apt. #, etc. City & State Zip Registered Agent the purpose of changing i motion it applicable. (N	Coun its (egistere	Name Street Address (I City ed office or register	04222004 C 4. FEI Number -14-1857984 5. Certificate of State 7. Name and Addre (P.O. Box Number is No	hg-P us Desired as of New Regi at Acceptable)	CR2E034 (10/03)	e
Suite. Apt. #, etc. City & State Zip 6. Net CHEUNG, KANA 2300 W. 84 STRE 36 310 EACH, FL 330 The above named et the obligations of res Signature. T Signature. T Signatur	ET This submits this statement for gistered agent. The set of pointed name of registered agent agent. The set of pointed name of registered agent agent agent.	Suite, Apt. #, etc. City & State Zip Registered Agent the purpose of changing i	its (egister	Name Street Address (I City ed office or register	04222004 C 4. FEI Number -14-1857984 5. Certificate of State 7. Name and Addre (P.O. Box Number is No	hg-P us Desired as of New Regi at Acceptable)	CR2E034 (10/03)	e
City & State Zip 6. Nation CHEUNG, KANA 300 W. 84 STRE 300 W. 84 STRE 300 W. 84 STRE 300 W. 84 STRE 300 W. 84 STRE 16 17 16 16 17 16 16 17 16 16 17 17 18 18 18 19 19 10 10 10 10 10 10 10 10 10 10	me and Address of Current f ET 18 ntity submits this statement for gistered agent. 	City & State Zip Registered Agent the purpose of changing i	its (egister	Name Street Address (I City ed office or register	 FEI Number 14-1857984 Certificate of State Name and Addre P.O. Box Number is No 	us Desired ss of New Regi at Acceptable)	Stered Agent	e
Zip 6. Name CHEUNG, KANA 300 W. 84 STRE 56 11ALEAH, FL 330 The above named end the obligations of reg 11GNATURE Bignature, fr Bignature, fr Bignature, fr 11GNATURE Bignature, fr 11GNATUR	me and Address of Current f ET 18 ntity submits this statement for gistered agent. 	Zip Registered Agent the purpose of changing ind the it applicable. (N	its (egister	Name Street Address (I City ed office or register	-14-1857984 5. Certificate of State 7. Name and Addre (P.O. Box Number is No	us Desired as of New Regi t Acceptable)	FL Zip Code	e
6. Name CHEUNG, KANA 300 W. 84 STRE 16 17 Streabove named end 16 ADBigations of reg 16 ADBigations of reg 16 ADBigations of reg 16 ADBigations of reg 17 Stream S	me and Address of Current f ET 18 ntity submits this statement for gistered agent. 	registered Agent the purpose of changing i not bla it applicable. (N	its (egister	Name Street Address (I City ed office or register	7. Name and Addre 7. Name and Addre (P.O. Box Number is No	as of New Regi	FL Zip Code	d
CHEUNG, KANA 1300 W. 84 STRE 136 136 1300 W. 84 STRE 136 141 EAH, FL 330 141 EAH, FL 330 141 EADRESS 150 EADRESS 171 EADRESS 171 EADRESS 171 EADRESS 171 EADRESS 171 EADRESS	ET 18 ntity submits this statement for gistered agent. ped or panted neme of registeres egent a 113 FEE IS \$150.00	the purpose of changing i		City City	(P.O. BÖX NUMDER IS NO	n Acceptable)	FL Zip Code	
I300 W. 84 STRE IALEAH, FL 330 The above named ei the obligations of reg Signature File NOW After May 1, 20 0. TILE AME TREET ADDRESS ITV-ST-ZIP TILE AME TREET ADDRESS	ET ntity submits this statement for gistered agent. ped or panted neme of registeres egent a 113 FEE IS \$150.00	nd bile it applicable. (N		City ed office or register				
I. The above named en the obligations of reg SIGNATURE FILE NOW After May 1, 20 0. TILE T	ntity submits this statement for gistered agent. 	nd bile it applicable. (N		ed office or register	red agent, or both, in th	e State of Florid		
In obligations of req SIGNATURE Signature. If FILE NOW After May 1, 20 ID. ITLE ITL	gistered agent. ped or printed name of registeres agent a 113 FEE IS \$150.00	nd bile it applicable. (N			real agent, or both, in th	e State of Florid	a. I am familiar with,	and accept
ITLE P TREET ADDRESS ITY-ST-ZIP HIALE/ ITYE TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS		10 Trust Fund Co	ontribution.		.00 May Be led to Fees			·
ITREET ADDRESS 3300 W ITY-ST-ZIP HIALE/ ITLE HIALE/ ITLE HIALE/ ITTEET ADDRESS HIALE/ ITY-ST-ZIP HIALE/	OFFICERS AND (11. 	E	ADDITIONS/CHAN	GES TO OFFICE	RS AND DIRECTORS	Addition
WME STREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS	NĞ, KANA V. 84 STREET, B6 AH, FL 33018		*	EET ADDRESS - ST-ZIP				
ITLE IAME TREET ADORESS		Delete		· /		<u>ر ا</u>	Change	Addition
		Delete	Titli Nam Stre	E - IE ET ADDRESS			Change	Addition
ITY-ST-ZP ITLE IAME STREET ADDRESS DITY-ST-ZIP		Deicte	TITU Nam . stre	1			Change	Addition
ITLE IAME ITREET ADORESS ITY-ST-ZIP		Delete	TITLE NAM STRE	E		<u>.</u>	Change	Addition
ITLE IAME TREET ADDRESS ITY-ST-ZIP		_ Delete	. TITLI NAM STRE	E .			Change	Addition
 I hereby certify that indicated on this re of the corporation of 	t the information supplied with	this filing does not qualify true and accurate and that	for the exe	mption stated in Se	same lecal effect as if r	made under oali	1: that I am an officer	or director
SIGNATURE:	attachment with an address, v	wered to execute this repo with all other like empowere	ed.	red by Chapter 607		that my name a	,	125-771