

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 21, 2004 8:00 am
Secretary of State

04-21-2004 90057 041 ***150.00

DOCUMENT # P03000034830 1. Entity Name T J NAIL CORP			
Principal Place of Business 6824 SW 35TH STREET MIRAMAR FL 33023		Mailing Address 6824 SW 35TH STREET MIRAMAR FL 33023	
2. Principal Place of Business 14751 NW 7th Ave Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State N Miami, FL		City & State	
Zip 33168		Country USA	
6. Name and Address of Current Registered Agent VUONG, THUAN D 6824 SW 35th STREET MIRAMAR FL 33023		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 _____ Signature, typed or printed name of registered agent and not if applicable. (NOTE: Registered Agent signature required when reissuing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State		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 NAME STREET ADDRESS CITY- ST- ZIP	P.V.P. VUONG, THUAN 6824 SW 35TH STREET MIRAMAR FL 33023	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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: <u>Thuan Vuong</u> SIGNATURE AND TYPED OR PRINTED NAME OF SECOND OFFICER OR DIRECTOR			

66428760



MOORE CR2E034 (11/03)
57-1157662 57-1157662

4. FEI Number
23-8012887004-5
Applied For
Not Applicable

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

FL Zip Code