

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059117

Entity Name: NAIL ESSENCE INC.

FILED
Jun 26, 2005
Secretary of State

Current Principal Place of Business:

7511 N.W. 22ND AVENUE
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

2613 N.W. 10 AVE
APT. 204
MIAMI, FL 33127 US

New Mailing Address:

FEI Number: 41-2099353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKER, MISHEK S
18811 N.W. 11 AVE.
MIAMI, FL 33127 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLOOM, ANTOINETTE
Address: 2613 N.W. 10 AVE APT. # 204
City-St-Zip: MIAMI, FL 33127 US

Title: VP () Delete
Name: TUCKER, MISHEK
Address: 18811 N.W. 11TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

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 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 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: MISHEK TUCKER

VP

06/26/2005

Electronic Signature of Signing Officer or Director

Date