


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jan 09, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # P03000074610</b> 1. Entity Name* WONDER NAIL OF PALM BEACH, INC.	
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Principal Place of Business 1801 PALM BEACH LAKES BLVD SUITE 106 WEST PALM BEACH, FL 33401	Mailing Address 10214 ALLAMANDA BLVD PALM BEACH GARDENS, FL 33410
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**DO NOT WRITE IN THIS SPACE**



01072007 No Chg-P CR2E034 (11/05)

4. FEI Number 16-1678365	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LE, KIMLOAN  
10214 ALLAMANDA BLVD  
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE  
IN THIS SPACE**

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 Whe (NOTE: Registered Agent signature required when reinstating) Jan. 06. 07. DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000580203 01/10/07-80038-017 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LE, KIMLOAN 10214 ALLAMANDA BLVD PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HOANG, SY 10214 ALLAMANDA BLVD PALM BEACH GARDENS, FL 33410
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Whe Jan. 06. 07 (561) 689-2689 DATE Daytime Phone #