

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082010

Entity Name: NAIL TRAP, INC.

FILED  
Apr 26, 2005  
Secretary of State

## Current Principal Place of Business:

12349 UNIVERSITY MALL  
TAMPA, FL 33621 US

## New Principal Place of Business:

## Current Mailing Address:

811 PARSONS POINT  
SEFFNER, FL 33584 US

## New Mailing Address:

119 WINSTON MANOR CIR  
SEFFNER, FL 33584 US

FEI Number: 20-0111655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NGUYEN, THU-HUONG  
811 PARSONS POINT  
SEFFNER, FL 33584 US

## Name and Address of New Registered Agent:

NGUYEN, THU-HUONG  
119 WINSTON MANOR CIR  
SEFFNER, FL 33584 US

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

04/26/2005

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NGUYEN, THU-HUONG  
Address: 811 PARSONS POINT  
City-St-Zip: SEFFNER, FL 33584 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NGUYEN, THU-HUONG  
Address: 119 WINSTON MANOR CIR  
City-St-Zip: SEFFNER, FL 33584 US

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: THU HUONG NGUYEN

P

04/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date