

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085743

Entity Name: SEASIDE NAIL SPA INC.

FILED  
Jun 02, 2005  
Secretary of State

**Current Principal Place of Business:**

1204 E. ATLANTIC AVE.  
DELRAY BCH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

1204 E. ATLANTIC AVE.  
DELRAY BCH, FL 33483

**New Mailing Address:**

FEI Number: 04-3774295

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAWKE, STEPHANIE  
1204 E. ATLANTIC AVE.  
DELRAY BCH, FL 33483 US

**Name and Address of New Registered Agent:**

MICHAEL J MCGOEY CPA INC  
639 EAST OCEAN AVE  
SUITE 101  
BOYNTON BEACH, FL 33435 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: MICHAEL J MCGOEY

06/02/2005

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: MISS ( ) Delete  
Name: HAWKE, STEFANIE F MISS  
Address: 1385 CRYSTAL WAY APT L  
City-St-Zip: DELRAY BEACH, FL 33444

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: JJETI, AMELA  
Address: 1204 E. ATLANTIC AVE.  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP ( ) Change (X) Addition  
Name: MATALON, GAIL  
Address: 1204 E. ATLANTIC AVE  
City-St-Zip: DELRAY BEACH, FL 33483

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: AMELA LJETI

P

06/02/2005

Electronic Signature of Signing Officer or Director

Date