

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2005 8:00 am
Secretary of State

02-03-2005 90031 027 ***150.00

DOCUMENT # P04000094072

1. Entity Name
NAILA, INC.



Principal Place of Business
301 53RD ST.,
APT C
WEST PALM BCH., FL 33407 US

Mailing Address
301 53RD ST.,
APT C
WEST PALM BCH., FL 33407 US

66025794

2. Principal Place of Business
301 53RD STREET
Suite, Apt. #, etc.
APT D
City & State
West Palm Beach, FL
Zip
33407
Country
USA

3. Mailing Address
301 53RD STREET
Suite, Apt. #, etc.
APT D
City & State
West Palm Beach, FL
Zip
33407
Country
USA



01262005 Chg-P CR2E034 (10/03)

4. FEI Number
20-1268811

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

6. Name and Address of Current Registered Agent
SHARMA, SANJIV
301 53RD ST
APT C
WEST PALM BEACH, FL 33407

7. Name and Address of New Registered Agent
Name
SANJIV SHARMA
Street Address (P.O. Box Number is Not Acceptable)
APT D
301 53RD STREET
City
WEST PALM BEACH FL Zip Code
33407

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 DATE 1/26/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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	PD SHARMA, SANJIV 301 53RD ST APT C WEST PALM BCH, FL 33407 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANJIV SHARMA 301 53RD STREET APT D WEST PALM BEACH, FL 33407 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: DATE 1/26/05 561 347 2376

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

P840000094072

NAILA, INC.

301 53rd Street, Apt. D
West Palm Beach, FL 33407

66025794

August 11, 2005

To Whom It May Concern:

Please be advised that our company did not receive the notification dated February 15, 2005, concerning the missing information on our Annual Report application. Therefore, I am requesting that the \$400 late fee be waived.

The missing FEI number is as follows: 20-1268811

Thank you for your attention to this matter.

Sincerely,





Sanjiv Sharma
President

ATTACHMENT

P840000094010

66025794

NAILA, INC.		1022
		63-643/670 BRANCH 01028
DATE <u>1/28/05</u>		
PAY TO THE ORDER OF	<u>Florida Dept. of State</u>	\$ <u>150/-</u>
<u>One hundred and fifty</u>		DOLLARS
 WACHOVIA Wachovia Bank, N.A. wachovia.com		 Security Features. Details on Back.
FOR	<u>2005 Annual report</u>	