2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000144425

Entity Name: MAI SPA & NAILS, INC.

FILED Nov 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1613 LEE ROAD

Title:

WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

2220 DONEGAN PLACE 5225 WALNUT RIDGE DR ORLANDO, FL 32826 ORLANDO, FL 32829

FEI Number: 65-1232180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KEANS, SOVET

2220 DONEGAN PLACE

ORLANDO, FL 32826 US

NGUYEN, DUNG

5225 WALNUT RIDGE DR

ORLANDO, FL 32829 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: NGUYEN DUNG 11/22/2005

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 ().

Election Campaign Financing Trust Fund Contribution ().

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

P () Delete Title: P (X) Change () Addition

Name:KEANS, PHACHName:PHAM, MINHAddress:2220 DONEGAN PLACEAddress:5225 WALNUT RIDGE DR

Address: 2220 DONEGAN PLACE Address: 5225 WALNOT RIDGE DR
City-St-Zip: ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32829

 Name:
 KEANS, SOVET
 Name:
 NGUYEN, DUNG

 Address:
 2220 DONEGAN PLACE
 Address:
 5225 WALNUT RIDGE DR

 City-St-Zip:
 ORLANDO, FL 32826
 City-St-Zip:
 ORLANDO, FL 32829

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: PHAM MINH P 11/22/2005