

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000097642

Entity Name: NAIL SPA I, INC.

FILED
Jul 10, 2006
Secretary of State

Current Principal Place of Business:

337 MARSH LANDING PKWY
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

337 MARSH LANDING PKWY
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 20-2944308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAM, HUOI
1642 HAWKINS COVE DR.
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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

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: P () Delete
Name: LAM, HUOI
Address: 1642 HAWKINS COVE DR.
City-St-Zip: JACKSONVILLE, FL 32246

Title: S () Delete
Name: KIEN, DIEU HOANG T
Address: 1642 HAWKINS COVE DR.
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: HUOI LAM

P

07/10/2006

Electronic Signature of Signing Officer or Director

Date