

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000111510

Entity Name: DAVIDA'S NAIL STUDIO, INC.

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

599 SHERWOOD AVENUE  
UNIT 208  
SATELLITE BEACH, FL 32937

**New Principal Place of Business:**

**Current Mailing Address:**

599 SHERWOOD AVENUE  
UNIT 208  
SATELLITE BEACH, FL 32937

**New Mailing Address:**

FEI Number: 20-3289051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DICK MULLER, INC.  
1127 S.PATRICK DRIVE  
SUITE #3  
SATELLITE BEACH, FL 32937 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BAUR, DAVIDA A  
Address: 1209 GLENHAM ROAD  
City-St-Zip: PALM BAY, FL 32937

I hereby 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 all other like empowered.

SIGNATURE: DAVIDA BAUR

PRES

04/26/2011

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

\_\_\_\_\_  
Date