

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000010140

Entity Name: EXPERT NAILS & SPA INC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

588 ALAFAYA TRAIL  
SUITE 20  
ORLANDO, FL 32828

**New Principal Place of Business:**

**Current Mailing Address:**

588 ALAFAYA TRAIL  
SUITE 20  
ORLANDO, FL 32828

**New Mailing Address:**

FEI Number: 20-4210499

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KHUU, HIEU  
588 ALAFAYA TRAIL  
SUITE 20  
ORLANDO, FL 32828 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KHUU, HIEU  
Address: 588 ALAFAYA TRAIL SUITE 20  
City-St-Zip: ORLANDO, FL 32828

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: HIEU KHUU

P

04/30/2010

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

\_\_\_\_\_  
Date