

FILED
Jul 26, 2007 8:00 am
Secretary of State

05-14-2007 90077 040 ***150.00

**2007 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P06000066272 1. Entity Name NAILWORKS, INC.					
Principal Place of Business 2490 NW 87TH LANE SUNRISE, FL 33322			Mailing Address 2490 NW 87TH LANE SUNRISE, FL 33322		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FLETCHER, JEFFREY K 2490 NW 87TH LANE SUNRISE, FL 33322				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ (Signature, typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when remaining)	
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FLETCHER, JEFFREY K 2490 NW 87TH LANE SUNRISE, FL 33322	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FLETCHER, LUCAS G 2490 NW 87TH LANE SUNRISE, FL 33322	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  7/20/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

66020616



07192007 Chg-P CR2E034 (12/06)

 X FEI Number **204872311** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

 FLETCHER, JEFFREY K
 2490 NW 87TH LANE
 SUNRISE, FL 33322

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

(Signature, typed or printed name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when remaining)

DATE

**FILE NOW!!! FEE IS \$150.00
 Due by September 14, 2007**

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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

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 CITY - ST - ZIP
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FLETCHER, JEFFREY K
2490 NW 87TH LANE
SUNRISE, FL 33322
☐ Delete
 TITLE
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FLETCHER, LUCAS G
2490 NW 87TH LANE
SUNRISE, FL 33322
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Month/Year

ATTACHMENT

July 12, 2007

NAILWORKS, INC.
2490 NW 87TH LANE
SUNRISE, FL 33322

SUBJECT: NAILWORKS, INC.
Ref. Number: P06000066272

66020616

Please enter
FEI in box #4
And sign #12.

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6056 and press 4. Your call will be answered in the order it is received.

ANNUAL REPORTS SECTION

Letter number: 907A00044569

/vrh
Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida
32314

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. OFFICERS
7. LIST, 8. NEXT FILING ON LIST, 9. PREV FILING ON LIST
ENTER SELECTION AND CR: