

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2008 8:00 am
Secretary of State

04-11-2008 90044 004 ***150.00

DOCUMENT # P07000053781	
1. Entity Name HUNG THAO NAILS SO HAPPY, INC.	

Principal Place of Business 7749-111 NORMANDY BLVD JACKSONVILLE FL 32221	Mailing Address 7749-111 NORMANDY BLVD JACKSONVILLE FL 32221
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

66009956



1st MOORE CR2E034 (10/07)

6. Name and Address of Current Registered Agent NGUYEN, HUNG H 7749-111 NORMANDY BLVD JACKSONVILLE FL 32221		4. FEI Number 42-1729484		Applied For ☐ Not Applicable
7. Name and Address of New Registered Agent		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
Name		City		Zip Code
Street Address (P.O. Box Number is Not Acceptable)		FL		

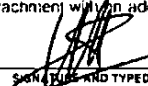
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and date of application. (NOTE: Registered Agent signature required when changing agent.)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete NGUYEN, HUNG H 7749-111 NORMANDY BLVD JACKSONVILLE FL 32221	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  **HUNG NGUYEN** 3/27/08 904-783-0754
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR