

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000126101

Entity Name: ORIENT NAILS SPA, INC.

FILED
Jan 31, 2009
Secretary of State

Current Principal Place of Business:

18536 NW 67 AVE
MIAMI, FL 33015 US

New Principal Place of Business:

Current Mailing Address:

18999 BISCAYNE BLVD
STE 205
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 26-1459746 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAM, CHI FUN
18999 BISCAYNE BLVD
STE 205
AVENTURA, FL 33180 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 () Delete
Name: SHAM, CHI FUN
Address: 18536 NW 67 AVE
City-St-Zip: MIAMI, FL 33015

Title: VP () Delete
Name: LI, JIAN GUO
Address: 3975 NW 92 AVE
City-St-Zip: SUNRISE, FL 33351 US

Title: S () Delete
Name: LI, LU HE
Address: 3975 NW 92 AVE
City-St-Zip: SUNRISE, FL 33351 US

Title: T () Delete
Name: YONG CONG, YU
Address: 3975 NW 92 AVE
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: CHI FUN SHAM

P

01/31/2009

Electronic Signature of Signing Officer or Director

Date