

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000063214

Entity Name: ESCAPE NAILS SPA INC.

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7646 DANU CT  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

7646 DANU CT  
ORLANDO, FL 32822

**New Mailing Address:**

FEI Number: 26-2917139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DANG, KHA  
7646 DANU CT  
ORLANDO, FL 32822 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: P  
Name: DANG, KHA  
Address: 7646 DANU CT  
City-St-Zip: ORLANDO, FL 32822

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: KHA DANG

P

04/15/2011

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

\_\_\_\_\_  
Date