

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000093769

FILED
Mar 06, 2009
Secretary of State

Entity Name: THE NAIL BEAUTIQUE INC.

Current Principal Place of Business:

10361 HAMMOCKS BLVD
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

10361 HAMMOCKS BLVD
MIAMI, FL 33196

New Mailing Address:

FEI Number: 26-3578561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DICARLO VALDEZ, SANDRA
10361 HAMMOCKS BLVD
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

TRUONG, TRUNG H
10361 HAMMOCKS BLVD
MIAMI, FL 33196 US

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: TRUNG TRUONG

03/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DICARLO VALDEZ, SANDRA
Address: 10361 HAMMOCKS BLVD
City-St-Zip: MIAMI, FL 33196

Title: D (X) Delete
Name: TRUONG, TRUNG H
Address: 10361 HAMMOCKS BLVD
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TRUONG, TRUNG H
Address: 10361 HAMMOCKS BLVD
City-St-Zip: MIAMI, FL 33196

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: TRUNG TRUONG

D

03/06/2009

Electronic Signature of Signing Officer or Director

Date