

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000102992

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** KIMBERLY NAILS AND SPA, INC.

**Current Principal Place of Business:**

6639 S DIXIE HWY  
MIAMI, FL 33156

**New Principal Place of Business:**

6639 S DIXIE HWY  
MIAMI, FL 33143

**Current Mailing Address:**

10400 SW 120TH ST  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 27-4362047

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NGO, HA V  
6639 S DIXIE HWY  
MIAMI, FL 33156 US

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

NGO, HA V  
6639 S DIXIE HWY  
MIAMI, FL 33143 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

01/27/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NGO, HA V  
Address: 6639 S DIXIE HWY  
City-St-Zip: MIAMI, FL 33143

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: HA V NGO

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

OWNE

01/27/2011

\_\_\_\_\_  
Date