

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000015094

Entity Name: Q NAILS MV CORP.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9279 SHERIDAN STREET  
COOPER CITY, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

9279 SHERIDAN STREET  
COOPER CITY, FL 33024

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

VO, MAN  
9279 SHERIDAN STREET  
COOPER CITY, FL 33024 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: VO, MAN  
Address: 9279 SHERIDAN STREET  
City-St-Zip: COOPER CITY, FL 33024

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: MAN VO

P

04/11/2012

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

\_\_\_\_\_  
Date