

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000032323

Entity Name: LA VINA NAILS, INC

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

603 COURTLAND BLVD.  
108  
DELTONA, FL 32738

## **Current Mailing Address:**

603 COURTLAND BLVD.  
108  
DELTONA, FL 32738

## **New Principal Place of Business:**

605 COURTLAND BLVD.  
108  
DELTONA, FL 32738

## **New Mailing Address:**

605 COURTLAND BLVD.  
108  
DELTONA, FL 32738

FEI Number: 30-0674266

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRAN, HA T  
4313 CYPRESS BAY 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: TRAN, HA T  
Address: 4313 CYPRESS BAY 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: HA TRAN

P

02/16/2012

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

\_\_\_\_\_  
Date