

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 31 AM 9:14

DOCUMENT # P94000065597 (4)

1. Corporation Name

NAIL PLACE BY WANDA, INC.

Principal Place of Business

Mailing Address

4362 NORTH FEDERAL HWY
FT LAUDERDALE FL 33308

4362 NORTH FEDERAL HWY
FT LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/07/1994

3a. Date of Last Report

4. FEI Number
65-0533918

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 **NAIL PLACE BY WANDA INC.**
Suite, Apt. #, etc

26 **4362 N Fed HWY**
Suite, Apt. #, etc

22 **4362 N Fed HWY**
City & State

27
City & State

23 **FT LAUDERDALE**
Zip

Country

28 **FT LAUDERDALE FL**
Zip

Country

24 **33308**

25

29 **33008**

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARKER, NGUYEN T
4362 NORTH FEDERAL HWY
FT LAUDERDALE FL 33308

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature)

(Signature)

DATE

05-24-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **PARKER, NGUYEN T**
STREET ADDRESS **6710 SW 10TH CT**
CITY, ST, ZIP **NORTH LAUDERDALE FL 33068**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

TITLE **D**
NAME **PARKER, ANTHONY**
STREET ADDRESS **6710 SW 10TH CT**
CITY, ST, ZIP **NORTH LAUDERDALE FL 33068**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *(Signature)*
NAME AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-24-95 (305) 492-5500
DATE (Day/Month/Year)