## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000022610

Entity Name: BELLISSIMA NAIL SALON, INC.

AVENTURA, FL 33160

City-St-Zip:

FILED Jan 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2821 E OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306 **Current Mailing Address: New Mailing Address:** 2821 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306 FEI Number: 65-0565425 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOGAN, ELLA 2821 E ÓAKLAND PARK BLVD. US FORT LAUDERDALE, FL 33306 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVTS** () Delete Title: () Change () Addition Name: KOGAN, ELLA Name: 2851 NE 183 ST #916 Address: Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip: Title: Title: () Change () Addition () Delete Name: KOGAN, ELLA Name: 2851 NE 183 ST # 916 Address: 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: ELLA KOGAN PVTS 01/14/2009