

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90114 016 ***150.00

DOCUMENT # *P-95000042039*
1. Entity Name
FANTASY NAIL & SKIN CARE INC



DO NOT WRITE IN THIS SPACE

70036584

2. Principal Place of Business
11300 NW 87 CT
Suite, Apt. #, etc.
UNIT 107
City & State
HIWALEAH GARDENS, FL

3. Mailing Address
11300 NW 87 CT
Suite, Apt. #, etc.
UNIT 107
City & State
HIWALEAH GARDENS, FL

Zip Country
33018 USA *33018 USA*

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0585580

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
None

Street Address (P.O. Box Number is Not Acceptable)
11300 NW 87 CT UNIT 107

City State Zip Code
Hiwaleah GARDENS FL 33018

8. 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, I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* *Alicia Vigoa, President* *4/4/03*

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<i>President</i> <i>Alicia Vigoa</i> <i>11300 NW 87 CT UNIT 107</i> <i>Hiwaleah Gardens FL 33018</i>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<i>Vice President</i> <i>Angel Vigoa</i> <i>11300 NW 87 CT UNIT 107</i> <i>Hiwaleah Gardens FL 33018</i>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate, and that the signatories 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; employees who prepare the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like employees.

SIGNATURE: *Alicia Vigoa, President* *4/4/03* *(305) 828 6628*

CR2ED034B (12/02)