

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000077305

Entity Name: 64TH AVENUE NAILS, INC.

FILED  
Feb 10, 2005  
Secretary of State

## Current Principal Place of Business:

6836 STIRLING RD  
HOLLYWOOD, FL 33024

## New Principal Place of Business:

## Current Mailing Address:

6836 STIRLING RD  
HOLLYWOOD, FL 33024

## New Mailing Address:

FEI Number: 65-0862244

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GILLE, LINDA  
6836 STIRLING RD  
HOLLYWOOD, 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GILLE, LINDA  
Address: 4624 DAVIE RD.  
City-St-Zip: DAVIE, FL 33314

Title: V ( ) Delete  
Name: GILLE, MIKE  
Address: 4624 DAVIE RD  
City-St-Zip: DAVIE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GILLE, LINDA  
Address: 6836 STIRLING ROAD  
City-St-Zip: HOLLYWOOD, FL 33024

Title: V (X) Change ( ) Addition  
Name: GILLE, MIKE  
Address: 6836 STIRLING ROAD  
City-St-Zip: HOLLYWOOD, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LINDA S GILLE

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

PRES

02/10/2005

\_\_\_\_\_  
Date