2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 06, 2000 8:00 am
Secretary of State
06-06-2000 90002 013 ***150.00

DOCUMENT # P99000003301

1. Entity Name
NAILXPO INC.

Principal Place of Business	Mailing Address
8580 WINDY CIRCLE BOYNTON BEACH FL 33437	8580 WINDY CIRCLE BOYNTON BEACH FL 33437-5123

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
4895 Windward Passage Dr			
Suite, Apt. #, etc. Bay #8		Suite, Apt. #, etc.	
City & State Boynton Beach Fl		City & State	
Zip 33436	Country U.S	Zip	Country

4. FEI Number 65-0889128 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DIAZ, TAMMY L 8580 WINDY CIRCLE BOYNTON BEACH FL 33437	Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code

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.

SIGNATURE ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	DIAZ, TAMMY L	NAME	
STREET ADDRESS	8580 WINDY CIRCLE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	CITY-ST-ZIP	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	DIAZ, RAFAEL	NAME	
STREET ADDRESS	8580 WINDY CIRCLE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tammy Diaz Pres. Tammy Diaz 3-6-00 (561)375-8970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State

AS-23-00
Attachment
DH 0990W003301
[redacted]

To Whom it May Concern.

I wrote a new check and voided the check you sent back. I called your office and was informed to re write the check. I made you a copy of the check you sent back for your files. Just incase there is a problem. It shows it was sent on time. Thank you.

Tanya Diaz

839859 0112

NAILXPO INC.
4895 WINDWARD PASSAGE DR. BAY #6
BOYNTON BEACH, FL 33436

63-643/670
BRANCH 00679

DATE 4-25-00

PAY TO THE ORDER OF Fl Department of State $ 150.00

One hundred & fifty 00 DOLLARS

First Union National Bank

FLEXIBLE BUSINESS BANKING

FIRST UNION R/T 067006432

FOR 2000 Uniform Bus. Dept Tanya Diaz

⑈000 1 6 2 1⑈ ⑆067006432⑆ 2090003058 28⑈