2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 13, 2005 08:00 AM Secretary of State **DOCUMENT # P99000014795** 1. Entity Name NAILS BY ODILIA INC. Mailing Address Principal Place of Business 801 S.W. 8TH ST. 801 S.W. 8TH ST. MIAMI, FL 33130 MIAMI, FL 33130 04082005 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number Not Applicable 65-0907237 Constitution of the second of \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MONTEAGUDO, JUANA O 801 S.W. 8TH ST. MIAMI, FL 33130 IN THIS SPACE 8. The above named entity submits this statement by the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE 1\$ \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MONTEAGUDO, JUANA O NAME 790000301315 04/13/05-80027-801 S.W. 8TH ST. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33130 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED