

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2000 8:00 am
Secretary of State
04-11-2000 90225 010 ***150.00

DOCUMENT # P99000110604

1. Entity Name

NAILSHOP TYRONE SQUARE, INC.

Principal Place of Business

**6901 22ND AVE N. SUITE 702
ST PETERSBURG FL 33710**

Mailing Address

**6901 22ND AVE N. SUITE 702
ST PETERSBURG FL 33710**

2. Principal Place of Business

6901 22ND AVE N

Suite, Apt. #, etc.
SUITE 702

3. Mailing Address

P O BOX 1938

Suite, Apt. #, etc.

City & State

ST PETERSBURG, FL

City & State

RIDGELAND, MS

Zip

33710

Country

USA

Zip

39158

Country

USA

4. FEI Number

64-0919510

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**NGUYEN, BINH O
5335 58TH ST NORTH
KENNETH CITY FL 33709**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE **PRESIDENT** ☐ Delete
NAME **BINH NGUYEN**
STREET ADDRESS **6901 22ND AVE N, SUITE 702**
CITY-ST-ZIP **ST PETERSBURG, FL 33710**

TITLE **SECRETARY/TREASURER** ☒ Delete
NAME **VICTORIA VU**
STREET ADDRESS **P O BOX 1938**
CITY-ST-ZIP **RIDGELAND, MS 39158**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SECRETARY/TREASURER** ☐ Change ☒ Addition
NAME **HIEN VU**
STREET ADDRESS **P O BOX 1938**
CITY-ST-ZIP **RIDGELAND, MS 39158**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HIEN VU

MARCH 23, 2000 (601) 991-1166

Date

Daytime Phone #

CR2E034 (9/99)