

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000064416

Entity Name: PRO NAILS SALON, INC.

Current Principal Place of Business:

10550 ST AUGUSTINE RD STE 1
JACKSONVILLE, FL 32257

Current Mailing Address:

10550 ST AUGUSTINE RD STE 1
JACKSONVILLE, FL 32257

FEI Number: 20-2782871

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LE, HOA
10550 ST AUGUSTINE RD STE 1
JACKSONVILLE, FL 32257 US

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

Officer/Director Detail :

Title P, VP
Name LE, HOA
Address 10550 ST AUGUSTINE RD STE 1
City-State-Zip: JACKSONVILLE FL 32257

I hereby 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 all other like empowered.

SIGNATURE: HOA LE _____

PRES

03/04/2015

Electronic Signature of Signing Officer/Director Detail

_____ Date