

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000051032

**Entity Name:** MIRACLE NAILS SALON CORP.

**Current Principal Place of Business:**

13038 NW 7TH AVE  
NORTH MIAMI, FL 33168

**Current Mailing Address:**

13038 NW 7TH AVE  
NORTH MIAMI, FL 33168 US

**FEI Number:** 87-0985659

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THE PROFESSIONAL FIRM CORP  
822 NE 125 STREET SUITE 109  
NORTH MIAMI, FL 33161 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  
Name ALTIDOR TURENE, DIEULA  
Address 450 NE 145 STREET  
City-State-Zip: NORTH MIAMI FL 33161

*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:** DIEULA ALTIDOR TURENE

**PRESIDENT**

**04/30/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date