

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000026321

**Entity Name:** FLORIDA SCULPTURED NAILS, INC.

**Current Principal Place of Business:**

3202 NE 2ND AVE  
MIAMI, FL 33137

**Current Mailing Address:**

3202 NE 2ND AVE  
MIAMI, FL 33137 US

**FEI Number:** 59-2314434

**Certificate of Status Desired:** No

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

PORTES, MARTINA  
3202 NE 2ND AVE  
MIAMI, FL 33137 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           PTD  
Name           PORTES, MARTINA  
Address        3202 NE 2ND AVE  
City-State-Zip: MIAMI FL 33137

*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:** MARTINA PORTES

**REGISTERED AGENT**

**04/06/2016**

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

\_\_\_\_\_ Date