

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000049945

Entity Name: ANGEL NAILS AND SPA EXPERT LLC

Current Principal Place of Business:

1164 WESTON RD
WESTON, FL 33326

Current Mailing Address:

1164 WESTON RD
WESTON, FL 33326

FEI Number: 80-0574504

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ANGEL NAILS AND SPA
1164 WESTON RD
WESTON, FL 33326 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

Authorized Person(s) Detail :

Title MGR
Name VAN, MICHELE
Address 1164 WESTON RD
City-State-Zip: WESTON FL 33326

Title MGRM
Name TRUONG, ROGIO
Address 1164 WESTON RD
City-State-Zip: WESTON FL 33326

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROGIO TRUONG

MRG

02/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date