

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000143336

**Entity Name:** VENETIAN NAILS SPA FORT LAUDERDALE LLC

**Current Principal Place of Business:**

1634 N FEDERAL HWY  
FORT LAUDERDALE, FL 33305

**Current Mailing Address:**

1634 N FEDERAL HWY  
FORT LAUDERDALE, FL 33305 US

**FEI Number: 45-4102704**

**Certificate of Status Desired: Yes**

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

LE, TRANG  
4655 SHILOH MILL BLVD  
JACKSONVILLE, FL 32246 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 MGRM  
Name LE, TRANG  
Address 4655 SHILOH MILL BLVD  
City-State-Zip: JACKSONVILLE FL 32246

Title MGRM  
Name PHAM, KHA  
Address 4655 SHILOH MILL BLVD  
City-State-Zip: JACKSONVILLE FL 32246

*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: TRANG LE**

**MGRM**

**03/20/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date