2018 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

REINSTATE

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1. CORPORATION NAME TM NAIL SALON at 2440 Ltd. DUE DATE:

CORPORATE ID.: 0782056-6

2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DIRECTOR.

CON DUONG 2440 N. HARRISON ST **ARLINGTON VA 22207**

5. TOTAL NUMBER OF AUTHORIZED SHARES: 1.000

- 3. CITY OR COUNTY OF VAIREGISTERED OFFICE: 106 - ARLINGTON COUNTY
- 4. STATE OR COUNTRY OF INCORPORATION: VA - VIRGINIA

Changes to items 1 through 5 above cannot be accomplished on this annual report form and will require a separate filing(s). Carefully read the enclosed instruction sheet. Visit our website at scc.virginia.gov/clk/formfee.aspx or contact the Clerk's Office. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

Mark this box if address shown below is correct	If address is blank or incorrect, add or correct below.
ADDRESS: 2440 N.HARRISON ST	ADDRESS:
CITY/ST/ZIP: ARLINGTON BLVD VA 22007	CITY/ST/ZIP:

7. DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed.

An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank: Information is correct Information is incorrect Delete information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below: Correction Addition Replacement
OFFICER X DIRECTOR X NAME: TRANG NGUYEN	NAME ON DUONG
TITLE: OFFICER	TITLE: President
ADDRESS: 2440 N. HARRISON ST	ADDRESS: 2440 N. HARVISONST,
CITY/ST/ZIP: ARLINGTON VA 22007	CITY/ST/ZIP: ALLINGTON, VAZZ007

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW.

SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT

It is a Class 1 misdemeanor for any person to sign a document that is false in any material respect with intent that the document be delivered to the Commission for filing.

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