

No. W 53985	Due no later than August 31, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable SKIN REJUVENATION LLC 1265 S PLEASANT VIEW RD POST FALLS, ID 83854	DEEANN ZAHN 1265 S PLEASANT VIEW RD POST FALLS, ID 83854 3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	DeeAnn Zahn	1265 S. Pleasant View Rd	Post Falls	Idaho	83854

Organized Under the Laws of:
 IDAHO
 W 53985

5.

Signature

Name (Typed or Printed)

DeeAnn Zahn
 DeeAnn Zahn

Date

Title

6/12/07
 member

Issued 06/01/2007

Do Not Tape or Staple

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