No. C 191422		Annual Report Form 1. Mailing Address: Correct in this box if needed. I AM SMILE INC. NATALIE FORSYTH 1086 E FOREST PARK LANE COEUR D ALENE ID 83815		2. Registered Agent and Address (NO PO BOX) NATALIE FORSYTH 1086 E FOREST PARK LANE COEUR D ALENE ID 83815 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		USA ess Addresses of Preside	ent, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	NATALIE FORSYTH		1086 E FOREST PARK LANE	COEUR D'ALENE	ID	USA	83815
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 191422		Signature: Natalie Fo	Date: 08/05/2012				
		Name (type or print)	Title: President				
Processed 08/05/2012	_	* Electronically provided signatures are accepted as original signatures.					