No. W 51922	D	Due no later than Jun 30, 2007	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		WILLIAM L CRUMP			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed.		3090 GENTRY WAY STE 200 MERIDIAN ID 83642			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	WILLIAM L	ADVANCED AESTHETIC LASERS, LLC WILLIAM L CRUMP 3090 GENTRY WAY STE 200					
	MERIDIAN II	MERIDIAN ID 83642		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Address	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER WILLIAM	L CRUMP	3090 GENTRY WAY STE 200	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: R	Signature: Rachel Davidson		Date: 07/16/2007			
W 51922	Name (type	Name (type or print): Rachel Davidson		Title: Office Manager			
Processed 07/16/2007	* Electronically	* Electronically provided signatures are accepted as original signatures.					