

No. C 162728

Due no later than September 30, 2006  
Annual Report Form

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

AESTHETIC SMILES FAMILY AND COSMETI  
4795 N SUMMIT WAY #1120  
MERIDIAN, ID 83642

2. Registered Agent and Office NO PO BOX

WADE PILLING  
1110 N FIVE MILE RD  
BOISE, ID 83713

3. New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

| <u>Office held</u> | <u>Name</u>     | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|-----------------|-------------------------------|-------------|--------------|------------|
| President          | Wade A. Pilling | 4795 N. Summit Way            | Meridian    | ID.          | 83642      |

5. Organized Under the Laws of:

IDAHO  
C 162728

6. Signature   
Name (Typed or Printed) Wade Pilling Date 9/5/06  
Title Owner