

No. C116185	Annual Report Form Due No Later Than November 30, 1997		2 Registered Agent and Office NOT A P O BOX																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1 Mailing Address Please Correct, If Not Correct SALON GAMINE, INC. PETER MADSEN PO BOX 334		PETER MADSEN 530 WHITETAIL DR HAILEY ID 83333																								
	HAILEY ID 83333		3 Organized Under the Laws of ID C116185																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																											
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Peter Madsen</td> <td>P.O. Box 334</td> <td>Hailey</td> <td>ID</td> <td>83333</td> </tr> <tr> <td>Secretary</td> <td>Peter Madsen</td> <td>P.O. Box 334</td> <td>Hailey</td> <td>ID</td> <td>83333</td> </tr> <tr> <td>Treasurer</td> <td>Peter Madsen</td> <td>P.O. Box 334</td> <td>Hailey</td> <td>ID</td> <td>83333</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Peter Madsen	P.O. Box 334	Hailey	ID	83333	Secretary	Peter Madsen	P.O. Box 334	Hailey	ID	83333	Treasurer	Peter Madsen	P.O. Box 334	Hailey	ID	83333
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5.		6. Signature Name (Typed or Printed) <u>Peter Madsen</u> Date <u>7/17/97</u> Title <u>Pres</u>																									

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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