

No. 94207	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Due No Later Than November 1, 1991		SANDRA WILLIS																								
	1. Mailing Address: Please Correct If Not Correct		1800 EAST 17TH ST.																								
	A TOUCH OF ELEGANCE NAIL SA SANDRA WILLIS 1800 EAST 17TH ST. IDAHO FALLS ID 83404		IDAHO FALLS ID 83404 3. Incorporated Under The Laws of ID NO: 094207																								
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th data-bbox="39 356 426 441"></th> <th data-bbox="426 356 743 441">Name</th> <th data-bbox="743 356 1156 441">Street or P.O. Address</th> <th data-bbox="1156 356 1321 441">City</th> <th data-bbox="1321 356 1453 441">State</th> <th data-bbox="1453 356 1622 441">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="39 441 426 484">President: —</td> <td data-bbox="426 441 743 484">Sandra L. Willis</td> <td data-bbox="743 441 1156 484"></td> <td data-bbox="1156 441 1321 484"></td> <td data-bbox="1321 441 1453 484"></td> <td data-bbox="1453 441 1622 484"></td> </tr> <tr> <td data-bbox="39 484 426 526">Secretary: —</td> <td data-bbox="426 484 743 526">VANDAIRA L. Packer</td> <td data-bbox="743 484 1156 526">Same as above</td> <td data-bbox="1156 484 1321 526"></td> <td data-bbox="1321 484 1453 526"></td> <td data-bbox="1453 484 1622 526"></td> </tr> <tr> <td data-bbox="39 526 426 569">Directors: —</td> <td data-bbox="426 526 743 569"></td> <td data-bbox="743 526 1156 569"></td> <td data-bbox="1156 526 1321 569"></td> <td data-bbox="1321 526 1453 569"></td> <td data-bbox="1453 526 1622 569"></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President: —	Sandra L. Willis					Secretary: —	VANDAIRA L. Packer	Same as above				Directors: —					
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President: —	Sandra L. Willis																										
Secretary: —	VANDAIRA L. Packer	Same as above																									
Directors: —																											
5. Nature of Business Nail Salon	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																										
	Signature <i>Sandra L. Willis</i> Name (Typed or Printed) Sandra L. Willis Date 9-1-91 Title President																										