No. C 184504			Due no later than Sep 30, 2017	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. PRACTICAL MAGIC SALON, INC. AMBER M MCNATT 592 E. SABLE RIDGE D.R KUNA ID 83634		592 E. SAE KUNA ID	AMBER MCNATT 592 E. SABLE RIDGE DR. KUNA ID 83634 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
and the second s	nes and Busin	ess Addresses	of President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT VICE PRESIDENT	AMBER M MCNATT JOHN L MCNATT		592 E. SABLE RIDGE DR. 592 E. SABLE RIDGE DR.	KUNA KUNA	ID ID	USA USA	83634 83634	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Amber McNatt Date: 08/0			/04/2017			
C 184504		Name (typ	e or print): Amber McNatt		Title: Pres			
Processed 08/04/2017	* Electronically provided signatures are accepted as original signatures.							