

No. C 147502	Reinstatement Annual Report Form ADMIN DISSOLVED 05/06/2005		2. Registered Agent and Office (NOT A P.O. BOX) DAVID M TRAN 1600 E SELTICE WAY STE 2C POST FALLS ID 83854														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. NAIL WORK ACADEMY, INC. 1600 E SELTICE WAY STE 2C POST FALLS ID 83854 <i>200 W Hanley Ave D 403</i> <i>CDA ID 83815</i>		3. <u>New</u> Registered Agent Signature.														
	4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td></td><td>David M Tran</td><td>200 W Hanley Ave. # D403 CDA. ID. 83815</td><td></td><td></td><td></td><td></td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		David M Tran	200 W Hanley Ave. # D403 CDA. ID. 83815			
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	David M Tran	200 W Hanley Ave. # D403 CDA. ID. 83815															
5. Organized Under the Laws of: IDAHO C 147502		6. <table><tr><td>Signature: <i>David M Tran</i></td><td>Date: <i>5/6/10</i></td></tr><tr><td>Name (type or print): <u>DAVID TRAN</u></td><td>Title: <u>President</u></td></tr></table>				Signature: <i>David M Tran</i>	Date: <i>5/6/10</i>	Name (type or print): <u>DAVID TRAN</u>	Title: <u>President</u>								
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Issued 04/23/2010 by SL1																	