| No. C 119231 | | Due no later than Apr 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. ADVANCED HYGIENE CONCEPTS, INC. VALERIE J WILLIAMS PO BOX 5689 KETCHUM ID 83340 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|--|---------------------------|--|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | 309 SAGE RE KETCHUM ID | VALERIE J WILLIAMS 309 SAGE RD KETCHUM ID 83340 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine | | | | avvoy (artismal) | (aptions)) | | | |
| Office Held | Name | less Addresses d | Street or PO Address | City | State | Country | Postal Code | |
| DIRECTOR VALERIE WII DIRECTOR LINDA O'GRA | | | 309 SAGE RD 541 WESTGATE DR | KETCHUM NAPA | ID CA | USA USA | 83340 94558 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Valerie Williams | | 1 | Date: 02/12/2013 | | | |
| C 119231 | | Name (type or print): Valerie Williams | | - | Title: Vice President | | | |
| Processed 02/12/201 | 13 | * Electronically | provided signatures are accepted as origin | al signatures. | | | | |