

No. C 90876	<b>Annual Report Form</b> Due No Later Than November 30, 1996		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  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, if Not Correct  HEADMASTERS OF LEWISTON, INC SHARON K. WICK 317 COEUR D' ALENE AVE.  COEUR D' ALENE ID 83814		PEGGY G. FOSTER 602 MAIN  LEWISTON ID 83501  3. Organized Under the Laws of:  ID C 90876																															
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Sharon K Wick</td> <td>317 Coeur d'Alene Ave</td> <td>CDA</td> <td>ID</td> <td>83814</td> </tr> <tr> <td>Sec/Tres</td> <td>Thomas E Gilbertz</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Director</td> <td>Arney Ray Wick</td> <td>1624 Boyd</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Director</td> <td>Peggy Foster</td> <td>602 Main</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Sharon K Wick	317 Coeur d'Alene Ave	CDA	ID	83814	Sec/Tres	Thomas E Gilbertz	" "	" "	" "	" "	Director	Arney Ray Wick	1624 Boyd	" "	" "	" "	Director	Peggy Foster	602 Main	Lewiston	ID	83501
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5. NATURE OF BUSINESS  COSMETOLOGY	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 <u>[Signature]</u> Date <u>7-16-96</u> Name (Typed or Printed) <u>Thomas E Gilbertz</u> Title <u>Sec/Tres</u>																																	

ISSUED: 07-06-1995

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