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| No. C 181137 | Due no later than Dec 31, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. G A MASSAGE & FITNESS INC GINO AGOSTINELLI 808 E SINGING HILLS DR POST FALLS ID 83854 | | GINO AGOSTINELLI 808 E SINGING HILLS DR POST FALLS ID 83854-9085 | | | |
| | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| TREASURER | LAUREN A AGOSTINELLI | 808 E SINGING HILLS DR | POST FALLS | ID | USA | 83854-9085 |
| SECRETARY | LINDA A. AGOSTINELLI | 808 E. SINGING HILLS DR. | POST FALLS | ID | USA | 83854-9085 |
| 5. Organized Under the Laws of: ID C 181137 | 6. Annual Report must be signed.* Signature: Gino Agostinelli Name (type or print): Gino Agostinelli | | Date: 12/28/2017 Title: President | | | |
| Processed 12/28/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | |