

No. C 126052

Due no later than October 31, 2008

Annual Report Form

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

BOISE MASSAGE THERAPY, INC.
CINDY AMANDUS
5995 W STATE STE *1C*
BOISE, ID 83703

2. Registered Agent and Office NO PO BOX

CINDY AMANDUS
5995 W STATE STE B
BOISE, ID 83703NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
president	Cindy Amandus	5995 W. State St, Ste C	Boise	Idaho	83703

5. Organized Under the Laws of:

IDAHO
C 126052

6.

Signature *Cindy Amandus*

Date

10-23-08

Name (Typed or Printed)

Cindy Amandus

Title

President

Issued 08/06/2008

Do Not Tape or Staple

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