No. C 151497				2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BLOOMING SENSATIONS, INC. JOHN J COLLINS 3067 E SHADOWVIEW		JOHN J COLLINS 3067 E SHADOWVIEW ST EAGLE ID 83616 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine			dent, Secretary, and Directors. Trea				J	
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	JOHN J COL	LINS	3067E SHADOWVIEW		EAGLE	ID	USA	83616
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 151497		Signature: John Collins			Date: 08/12/2010			
		Name (type or print): John Collins			Title: Owner			
Processed 08/12/201	.0	* Electronically provide	ed signatures are accepted as origin	nal signa	tures.			_