

No. **W 36085**

Due no later than **January 31, 2006**

Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

ASSOCIATED MASSAGE PROFESSIONALS LL
496F SHOUP AVE W
TWIN FALLS, ID 83301

MARYANN DOSHIER HERNANDEZ
NCTMB
496F SHOUP AVE W
TWIN FALLS, ID 83301

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
TREASURER	MICHAEL LAMPERS	241 8 th AVE E	TWIN FALLS	ID	83301
MEMBER	MARYANN HERNANDEZ	222 West Ave K	Jerome	ID	83338

5. Organized Under the Laws of:

IDAHO
W 36085

6.

Signature

Michael Lampers

Date

11-29-05

Name

(Typed or Printed)

Michael Lampers

Title

Treasurer

Issued 11/01/2005

Do Not Tape or Staple

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