No. C 184504	Due no later than Sep 30, 2010	2. Registered Agent and Office (NOT A P.O.
Return to:	Annual Report Form	BOX)
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720	Mailing Address: Correct in this box if needed. PRACTICAL MAGIC SALON, INC.	AMBER MCNATT 645 E COUGAR MERIDIAN ID 83642
NO FILING FEE IF RECEIVED BY DUE DATE	645 E COUGAR MERIDIAN ID 83642	3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names a	and Business Addresses of President, Secretary, Directors and(option	ional) Treasurer
Office Held Nam	e Street or PO Address	City State Country Postal Code
WP. John	MWatt bus E cougar MWatt same	Mendran ID &3646
. Organized Under the Laws of	6.	
IDAHO	Signature: MM Nat	Date: (1/8/10
C 184504	Name (type or print): Awbay W	Watt Title: Pres.
ssued 10/07/2010 by DK1		103724
I	NSTRUCTIONS FOR THE IDAHO ANNUA	

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Note: The office of the registered