

No. <b>W 19280</b>	<b>Due no later than May 31, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		PATRICIA A. WORK 3409 N COLE BOISE ID 83704			
	CJ BEAUTY LC PATRICIA A. WORK 5553 N. COLLISTER DR. BOISE ID 83703-4406 USA		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	PATRICIA A WORK	5553 COLLISTER	BOISE	ID	USA	83703
5. Organized Under the Laws of:  <b>ID</b> <b>W 19280</b>		6. Annual Report must be signed.* Signature: Patricia Work Name (type or print): Patricia Work		Date: 05/06/2013 Title: Owner		
Processed 05/06/2013		* Electronically provided signatures are accepted as original signatures.				