

No. W 9547	Due no later than August 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX LADONN GOODFELLOW 327 E 5TH N BURLEY, ID 83318																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable COSMETOLOGY SCHOOL OF ARTS & SCIENC LADONN GOODFELLOW 529 OVERLAND AVE BURLEY, ID 83318		3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members.																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>Financial Director</td> <td>LADONN Goodfellow</td> <td>1713 V ST</td> <td>Heyburn</td> <td>ID</td> <td>83336</td> </tr> <tr> <td>Administration Clerk</td> <td>Ronda</td> <td>2474 Rock Creek Rd.</td> <td>Hansen</td> <td>ID</td> <td>83334</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Financial Director	LADONN Goodfellow	1713 V ST	Heyburn	ID	83336	Administration Clerk	Ronda	2474 Rock Creek Rd.	Hansen	ID	83334
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5. Organized Under the Laws of: IDAHO W 9547		6. Signature <u>Ladonn Goodfellow</u> Date <u>6-19-08</u> Name (Typed or Printed) <u>Ladonn Goodfellow</u> Title <u>Financial Director</u>																			

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