

No. C 91222	Reinstatement Annual Report Form ADMIN DISSOLVED 04/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) JULIE A HOFER 425 N 2ND E MOUNTAIN HOME ID 83647																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. HAIR REFLECTIONS, INC. JULIE HOFER 425 N 2ND E MOUNTAIN HOME ID 83647		3. <u>New</u> Registered Agent Signature.																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>Julie Hofer</td> <td>425 N 2nd E</td> <td>Mt. Home</td> <td>ID</td> <td>21 more</td> <td>83647</td> </tr> <tr> <td>VP</td> <td>Albert Hofer</td> <td>425 N 2nd E</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRES.	Julie Hofer	425 N 2nd E	Mt. Home	ID	21 more	83647	VP	Albert Hofer	425 N 2nd E	"	"	"	"
Office Held	Name	Street or PO Address	City	State	Country	Postal Code																		
PRES.	Julie Hofer	425 N 2nd E	Mt. Home	ID	21 more	83647																		
VP	Albert Hofer	425 N 2nd E	"	"	"	"																		
5. Organized Under the Laws of: IDAHO C 91222		6. Signatures: <u>Julie A Hofer</u> Name (type or print): <u>Julie A Hofer</u> Date: <u>7-1-14</u> Title: <u>Pres</u>																						

Issued 07/01/2014 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM