

No. W 49665

Due no later than April 30, 2009  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

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

MARYANNE'S OWN BODYCARE ESSENTIALS  
CHRIS BARROTT  
113 LINCOLN  
KIMBERLY, ID 83341CHRIS BARROTT  
113 LINCOLN  
KIMBERLY, ID 83341NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres	Maryanne Barrott	113 Lincoln	Kimberly	ID	83341
VP	Chris Barrott	113 Lincoln	Kimberly	ID	83341

5. Organized Under the Laws of:

IDAHO  
W 49665

6.

Signature

Chris Barrott

Date

2/15/09

Name (Typed or Printed)

Chris Barrott

Title

VP

Issued 02/02/2009

Do Not Tape or Staple

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