

No. W 27287

Due no later than December 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

ANGIE KIRKPATRICK
106 N 6TH ST STE 219
BOISE, ID 83702

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

LEBELLE EPOQUE FACIAL THERAPIES BY
106 N 6TH ST STE 219
BOISE, ID 83702

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
SE. Partner	Angie Kirkpatrick	440 Brookdale	Boise	Id.	83702
SE. Partner Partner/Bookkeeper	Judi Schroeder	2811 S Swallowtail	"	"	83706

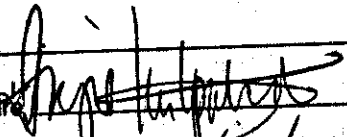
5. Organized Under the Laws of:
IDAHO
W 27287

6.

Signature

Name

(Typed or
Printed)


ANGIE Kirkpatrick

Date

10-10-07

Title

SE. Partner

Issued 10/01/2007

Do Not Tape or Staple

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