No. <b>C 187454</b>	Due no later than Jun 30, 2013 2. Registered Agent and Address (NO PO I				PO BOX)
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address: Correct in this box if needed.  FRAYA MEDICAL SPA, INC. HOLLY ZOE 4417 S HOLMES IDAHO FALLS ID 83404	HOLLY ZOE 4417 S HOLMES IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Rus	ness Addresses of President, Secretary, and Directors. Treasurer	(optional)			
Office Held Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT HOLLY ZOI	4417 HOLMES	IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of:  ID  C 187454	6. Annual Report must be signed.* Signature: Holly Zoe Name (type or print): Holly Zoe	Date: 05/21/2013 Title: President			
Processed 05/21/2013	* Electronically provided signatures are accepted as original signatures.				