

No. W 21797		Due no later than Dec 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		TIM ANDRA 11294 W BLUECANYON ST BOISE ID 83713			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ANDRA'S PRO SPA SERVICE, LLC TIMOTHY D ANDRA 11294 W BLUECANYON ST BOISE ID 83713					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	TIM ANDRA	11294 W BLUECANYON ST	BOISE	ID	USA	83713	
MANAGER	DIANE ANDRA	11294 W BLUECANYON ST	BOISE	ID	USA	83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 21797		Signature: Tim Andra			Date: 01/09/2012		
		Name (type or print): Tim Andra			Title: Manager		
Processed 01/09/2012		* Electronically provided signatures are accepted as original signatures.					