No. C 212830		Due no later than Feb 28, 2018		2. Registered	2. Registered Agent and Address (NO 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. XPRESSIONS SALON INC CHADWICK D GERIG 1320 S VISTA AVE BOISE ID 83705		1320 S VIS BOISE ID	CHADWICK D GERIG 1320 S VISTA AVE BOISE ID 83705-8370 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names	and Busin	ess Addresses of I	President, Secretary, and Directors. Treasur	er (optional).				
Office Held Na	ame		Street or PO Address	City	State	Country	Postal Code	
		I LAMORIE DEON GERIG	1080 E BERGESON ST 1410 W WASHINGTON ST.	BOISE BOISE	ID ID	USA USA	83706 83705-2567	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ch		Date: 01/28/2018				
C 212830		Name (type or		Title: President				
Processed 01/28/2018	* Electronically provided signatures are accepted as original signatures.							