

No. W 53295

Due no later than August 31, 2008

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

MASSAGE WORX, LLC
20 N MILL HOLLOW RD
REXBURG, ID 83440

468 Maple Dr.
Rexburg, ID
83440

BROOKE L BAIAMONTE
147 N 2ND EAST STE 4E
REXBURG, ID 83440

468 Maple Dr.
Rexburg, ID 83440

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
	owner Brooke Baimonte	468 Maple Dr.	Rexburg,	ID	83440

5. Organized Under the Laws of:
IDAHO
W 53295

6.

Signature

Brooke L Baimonte

Date

8/30/08

Name

(Typed or
Printed)

Brooke L Baimonte

Title

LMP

Issued 06/02/2008

Do Not Tape or Staple

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