

No. <b>C 178845</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 10/04/2016</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> SYLVIA M MEDINA 515 PARK AVE IDAHO FALLS ID 83402														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>				<b>1. Mailing Address: Correct in this box if needed.</b> GREEN KIDS CLUB, INC. SYLVIA M MEDINA PO BOX 50030 IDAHO FALLS ID 83405													
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.</b> <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President/CEO</td> <td>Sylvia Medina</td> <td>515 Park Ave</td> <td>Idaho Falls</td> <td>ID</td> <td></td> <td>83402</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President/CEO	Sylvia Medina	515 Park Ave	Idaho Falls	ID		83402
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President/CEO	Sylvia Medina	515 Park Ave	Idaho Falls	ID		83402											
<b>5. Organized Under the Laws of:</b>  IDAHO C 178845	<b>6. Signature:</b> <i>Smd</i> <hr/> <b>Name (type or print):</b> <i>Sylvia Medina</i>			<b>Date:</b> <i>10/11/16</i> <hr/> <b>Title:</b> <i>President/CEO</i>													

Issued 10/11/2016 by online

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM