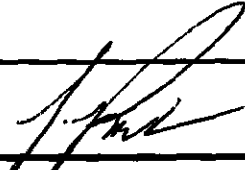


No. C 125939	Reinstatement Annual Report Form ADMIN DISSOLVED 01/06/2011		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. PAV. CO. LIVE. JOHN S PAVKOV PO BOX 474 GOODING ID 83330		JOHN SCOTT PAVKOV 1975 E 1775 S GOODING ID 83330 3. <u>New</u> Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
owner Pres.	Scott PAVKOV	PO BOX 474	GOODING	IDAHO USA 83330
5. Organized Under the Laws of: IDAHO C 125939		6. Signature:  Date: 1/28/11 Name (type or print): J. Scott Pavlov Title: owner		
Issued 01/25/2011 by KAH				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.