

FILED EFFECTIVE

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No. W 20381	Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009		2. Registered Agent and Office (NOT A P.O. BOX) TONY CHAVEZ 224 W 2ND SOUTH RIGBY ID 83442															
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. ALL STAR EXCAVATING L.L.C. 11109 E RIRIE HWY IDAHO FALLS ID 83401		3. New Registered Agent Signature.															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <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>Owner</td> <td>Tony Chavez</td> <td>11109 E Ririe Hwy</td> <td>Idaho Falls</td> <td>ID</td> <td>USA</td> <td>83401</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Owner	Tony Chavez	11109 E Ririe Hwy	Idaho Falls	ID	USA	83401
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5. Organized Under the Laws of: IDAHO W 20381		6. <table border="1"> <tr> <td>Signature: <u>Tony Chavez</u></td> <td>Date: <u>5/26/10</u></td> </tr> <tr> <td>Name (type or print): <u>Tony Chavez</u></td> <td>Title: <u>Owner</u></td> </tr> </table>			Signature: <u>Tony Chavez</u>	Date: <u>5/26/10</u>	Name (type or print): <u>Tony Chavez</u>	Title: <u>Owner</u>										
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the current address is not shown by State of Idaho, please update.