

No. W 69225	Due no later than December 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		MELANIE MCMANUS 412 E CLARK PAUL, ID 83347 3. <u>New</u> Registered Agent Signature												
	MELANIE MCMANUS JANITORIAL AND INDU PO BOX 733 PAUL, ID 83347														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>owner</td> <td>Melanie McManus</td> <td>P.O. Box 733</td> <td>Paul</td> <td>Id</td> <td>83347</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	owner	Melanie McManus	P.O. Box 733	Paul	Id	83347
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
owner	Melanie McManus	P.O. Box 733	Paul	Id	83347										
5. Organized Under the Laws of: IDAHO W 69225		6. Signature <u>Melanie McManus</u> Date <u>10-10-08</u> Name <small>(Typed or Printed)</small> <u>Melanie McManus</u> Title <u>owner</u>													

Issued 10/01/2008

Do Not Tape or Staple

200812008926