No. C 158615	Reinstatement Annual Report Form ADMIN DISSOLVED 05/13/2011 1. Mailing Address: Correct in this box if needed.	2. Registered Agent and Office (NOT A P.O. BOX) JOHN SEILLER 191 5TH ST W 3RD FL KETCHUM ID 83440
Return to:		
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		
	SALSARDO, INC.	
	22214 CORAL BELL LN WOODLAND HILLS-CA-91367	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00	c/o John Seiller, Attorney at Law P.O. Box 6090 Ketchum, ID 83340	v
4. Corporations: Enter N	omes and Business Addresses of President, Secretary	
Office Held Nam	ne Street or PO Address	City State Country Code
rresidenc sa.	lvatore Caredda 22214 Coral Bell I W	Toodland Hills CA USA 91367
		The state of the s
5. Organized Under the Law	s of: 6.	Date: 7-27-11
C 158615	Name (type or print): Salvatore Cared	da Title: Pres.
Issued 05/25/2011 by JL1		

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.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not put "same as last year" or "same as above"</u>. These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.