No. C 161800	Reinstatement Annual Report Form	2. Registered Agent and Office (NoRAL 8) P.O. BOX)
eturn to:	ADMIN DISSOLVED 11/08/2007	QYDE CRANCE CRETARY OF STA 1110 N FIVE MILE STATE OF IDAHO BOISE ID 83713 STATE OF IDAHO
SECRETARY OF STATE 450 N 4th STREET PO 80X 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.	BOISE ID 83713 STALE UF IDAHO
	ROMIO'S OF IDAHO, INC.	
	1110 N FIVE MILE RD	
	BOISE ID 83713	3. <u>New</u> Registered Agent Signature.
REINSTATEMENT		
FEE DUE: \$30.00		
	nes and Business Addresses of President, Secretary, Directo ne Street or PO Address	City State Country Postal Code
ffice Heid Nan		
resident	Constantine Georgilakis,	110 No Five Mile Kan
		BOIL IN , & USA, 83713
ن (18) الإياري	r(L,	
ţi.	3	
5. Organized Under the La	ivs of: 6.	
TDALLO	Signature:	Date: 4/26/07
IDAHO	· · · · · · · · · · · · · · · · · · ·	
C 161800	Name (type or print): Constantine	Georgilatis Title: Pres.
Issued 11/26/2007 by CLF		

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 opriected 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: Do not put "same as last year" or "same as above". 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.