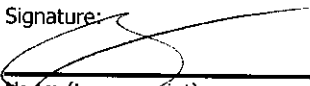


No. C 168857	Reinstatement Annual Report Form ADMIN DISSOLVED 12/09/2011		2. Registered Agent and Office (NOT A P.O. BOX)														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. SEMCOAT, INC. KARL T BONAR 3321 CRANE CREEK ROAD BOISE ID 83702 USA 4229 N. GINZEL ST BOISE, ID 83703		KARL T BONAR 3321 CRANE CREEK ROAD BOISE ID 83702 4229 N. GINZEL ST BOISE, ID 83703														
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>President</td> <td>KARL BONAR</td> <td>4229 N. GINZEL ST</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83703</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	KARL BONAR	4229 N. GINZEL ST	Boise	ID	USA	83703
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	KARL BONAR	4229 N. GINZEL ST	Boise	ID	USA	83703											
5. Organized Under the Laws of: IDAHO C 168857	6. Signature:  Name (type or print): <u>KARL BONAR</u> Date: <u>12/4/2012</u> Title: <u>President</u>																

Issued 12/04/2012 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM