

No. C 109863		Reinstatement Annual Report Form		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		ADMIN DISSOLVED 06/12/2013		FRANK D HOPKINS 523 RENNY IDAHO FALLS ID 83401																						
REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. WORK WEAR HOUSE, CORPORATION FRANK HOPKINS 2273 E 17TH ST IDAHO FALLS ID 83404		3. New 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>Frank Hopkins</td><td>523 Renny Ave,</td><td>Idaho Falls,</td><td>ID</td><td></td><td>83401</td></tr><tr><td>Secretary</td><td>Tammi Hopkins</td><td>523 Renny Ave,</td><td>Idaho Falls,</td><td>ID</td><td></td><td>83401</td></tr></tbody></table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Frank Hopkins	523 Renny Ave,	Idaho Falls,	ID		83401	Secretary	Tammi Hopkins	523 Renny Ave,	Idaho Falls,	ID		83401
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Secretary	Tammi Hopkins	523 Renny Ave,	Idaho Falls,	ID		83401																				
5. Organized Under the Laws of: IDAHO C 109863		6. <table border="1"><tr><td>Signature: </td><td>Date: 8 Jth 7-8-13</td></tr><tr><td>Name (type or print): Tammi Hopkins</td><td>Title: Sec.</td></tr></table>				Signature: 	Date: 8 J th 7-8-13	Name (type or print): Tammi Hopkins	Title: Sec.																	
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Issued 07/08/2013 by KAH																										

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM