No. C 185067	Due no later than Nov 30, 2012	2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. MICHAEL M NAIL CPA PC MICHAEL M NAIL 906 N ARMSTRONG DR COEUR D ALENE ID 83814	MICHAEL M NAIL 906 N ARMSTRONG DR COEUR D ALENE ID 83814 3. New Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Corporations: Enter Names and Busin	ness Addresses of President, Secretary, and Directors. Treasurer	(optional).
Office Held Name	Street or PO Address	City State Country Postal Code
PRESIDENT MICHAEL M	NAIL 906 N ARMSTRONG DR	COEUR D ALENE ID USA 83814
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: Michael Nail	Date: 09/14/2012
C 185067	Name (type or print): Michael Nail	Title: President
* Electronically provided signatures are accepted as original signatures.		