

|                                                                                                                                                        |               |                                                                                                                                                  |          |                                                            |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------|---------|------------------|--|
| No. <b>C 55704</b>                                                                                                                                     |               | <b>Due no later than May 31, 2010</b>                                                                                                            |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>         |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>OWYHEE AUTO SUPPLY, INC.<br>KIM MACKENZIE<br>P. O. BOX 967<br>HOMEDALE ID 83628 |          | KIM MACKENZIE<br>4 EAST IDAHO-BOX 967<br>HOMEDALE ID 83628 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                                  |          | 3. <u>New</u> Registered Agent Signature:*                 |         |                  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |               |                                                                                                                                                  |          |                                                            |         |                  |  |
| Office Held                                                                                                                                            | Name          | Street or PO Address                                                                                                                             | City     | State                                                      | Country | Postal Code      |  |
| SECRETARY                                                                                                                                              | KIM MACKENZIE | P.O. BOX 443                                                                                                                                     | HOMEDALE | ID                                                         | USA     | 83628            |  |
| PRESIDENT                                                                                                                                              | MIKE MATTESON | 16557 GARNET                                                                                                                                     | WILDER   | ID                                                         | USA     | 83628            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                                |          |                                                            |         |                  |  |
| <b>ID<br/>C 55704</b>                                                                                                                                  |               | Signature: Kim Mackenzie                                                                                                                         |          |                                                            |         | Date: 03/18/2010 |  |
|                                                                                                                                                        |               | Name (type or print): Kim Mackenzie                                                                                                              |          |                                                            |         | Title: Secretary |  |
| Processed 03/18/2010                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                        |          |                                                            |         |                  |  |