No. C 185371		Due no later than Dec 31, 2010		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SHARLA O'KRAKEL			
SECRETARY OF STATE		1. Mailing Address: Correct in this box if needed.			104 9TH AVE S NAMPA ID 83651			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		ACCOUNTING PLUS TAX SERVICES, INC. SHARLA C O'KRAKEL 104 9TH AVE S		ועאויורא וט 63031				
		NAMPA ID 83651		3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names	and Busine	ess Addresses of	President, Secretary, and Directors. Treasur	er (optional).				
Office Held Nar	me		Street or PO Address	City	State	Country	Postal Code	
	GINGER C KJALL		21793 MARKET ROAD	PARMA	ID	USA	83642	
PRESIDENT SHA	SHARLA C O'KR		13339 SOUTH MIDWAY ROAD	NAMPA	ID	USA	83686	
5.0		C A						
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 185371		Signature: Sh		Date: 01/10/2011				
		Name (type o		Title: President				
Processed 01/10/2011		* Electronically provided signatures are accepted as original signatures.						