2. Registered Agent and Office (NOT A Reinstatement Annual Report Form No. C 57708 P.O. BOX) ADMIN DISSOLVED 05/13/2011 TAMARA DEBOER Return to: 1. Mailing Address: Correct in this box if needed. SECRETARY OF STATE MANAPAR ACK 18 3683 POS05X 450 N 4th STREET PO BOX 83720 UNAGA-EUSTI ENTERPRISES, INC. 7627 Hwy 44 BOISE, ID 83720-0080 TAMARA DEBOER Star, Idaho 83 3. New Registered Agent Signature. 83669 7627 HWY 44 STAR ID 83669 Kemara of Deltaler REINSTATEMENT FEE DUE: \$30.00 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. Postal City State Country Street or PO Address Office Held Name President Tamara J. DeBoer 12800 W. Deep CanyonStar, ID USA 83669 Sec/Treas Chelsie B. Natwick 12081 Fieldstone Pl Middleton ID 83644 5. Organized Under the Laws of: |6. _{Date:} 6/10/11 Signaty/re: **IDAHO** Tamara J Name (type or print): DeBoer President Title: Pres C 57708 Issued 06/10/2011 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not put "same as last year" or</u> "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.