

No. C 99741	Due no later than Sep 30, 2012 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CRAZY BOB'S CUT RATE, INC. LESLIE B SPARKS 11089 USTICK RD NAMPA ID 83687		LESLIE B SPARKS 1736 GARRITY BLVD NAMPA ID 83653 3. <u>New</u> Registered Agent Signature.																												
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <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>Leslie B. Sparks</td> <td>11089 Ustick Road</td> <td>Nampa</td> <td>Idaho</td> <td>Conyon</td> <td></td> </tr> <tr> <td>Secretary →</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director →</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President →	Leslie B. Sparks	11089 Ustick Road	Nampa	Idaho	Conyon		Secretary →							Director →						
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Secretary →																															
Director →																															
5. Organized Under the Laws of: IDAHO C 99741		6. Signature: <u>Leslie B. Sparks</u> Date: <u>7-19-2012</u> Name (type or print): <u>LESLIE B SPARKS</u> Title: <u>President</u>																													
Issued 07/12/2012 by DK1		123628																													

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the