No. **C 150295**	**Due no later than Aug 31, 2015** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** QUALITY CONCEPTS, INC. BRIAN HOPKINS 272 TAILWIND CIRCLE CHUBBUCK ID 83202 USA	BRIAN HOPKINS 272 TAILWIND CIRCLE CHUBBUCK ID 83202 3. New 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
PRESIDENT	BRIAN HOPKINS	272 TAILWIND CIRCLE	CHUBBUCK	ID	USA	83202

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 150295**	Signature: BRIAN HOPKINS Name (type or print): BRIAN HOPKINS	Date: 06/23/2015 Title: PRESIDENT

Processed 06/23/2015

* Electronically provided signatures are accepted as original signatures.