

No. C 67447	Due no later than Aug 31, 2009 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. SAMUEL EISMANN, P.A. SAMUEL EISMANN 1424 SHERMAN AVE #500 COEUR D'ALENE ID 83814	SAMUEL EISMANN 1424 SHERMAN AVE #500 COEUR D'ALENE ID 83814 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
PRESIDENT	SAMUEL EISMANN	1424 SHERMAN AVE, SUITE 500	COEUR D'ALENE	ID	USA	83814
5. Organized Under the Laws of: ID C 67447	6. Annual Report must be signed.* Signature: Samuel Eismann Name (type or print): Samuel Eismann		Date: 09/09/2009 Title: President			
Processed 09/09/2009		* Electronically provided signatures are accepted as original signatures.				