

No. <b>C 190063</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/10/2013</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. HYDROMANIACS UN. LIMITED DOUGLAS MILLER 5984 N 17TH ST COEUR D ALENE ID 83815	DOUGLAS MILLER 5984 N 17TH ST COEUR D ALENE ID 83815															
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Douglas Miller</td><td>5984 N 17th St</td><td>Coeur d'Alene</td><td>Idaho</td><td>Kootenai</td><td>83815</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Douglas Miller	5984 N 17th St	Coeur d'Alene	Idaho	Kootenai	83815
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Douglas Miller	5984 N 17th St	Coeur d'Alene	Idaho	Kootenai	83815											
5. Organized Under the Laws of:  <b>IDAHO</b> <b>C 190063</b>	6. Signature: <u><i>Douglas Miller</i></u> Name (type or print): <u>Douglas Miller</u> Date: <u>10/28/13</u> Title: _____																
Issued 10/25/2013 by CLH																	