No. C 156691	Di	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed. MARTHA L. SANDIFER, CPA INC. MARTHA L SANDIFER 8921 W HACKAMORE DR BOISE ID 83709-1673			MARTHA L SANDIFER 8921 W HACKAMORE DR BOISE ID 83709-1673 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE	USA USA	3/09-10/3	3. <u>New</u> Registe	ered Agent 3	griature.		
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 MARTHA L	SANDIFER	8921 W HACKAMORE DR	BOISE	ID	USA	83709-1673	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Ma	artha Sandifer		Date: 09/06/2011			
C 156691	Name (type or print): Martha Sandifer			Title: President			
Processed 09/06/2011	* Electronically provided signatures are accepted as original signatures.						