

FILED EFFECTIVE REINSTATEMENT

No. C 29677 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN DISSOLVED 03/11/2005 1. Mailing Address - Correct in this box, if applicable HIGGINS, INC. C LISA HIGGINS 6277 South 400 West Heyburn, Idaho 83336	2. Registered Agent and Office NOT A P.O. BOX C LISA HIGGINS 627 South 400 West Heyburn, Idaho 83336 3. New registered agent signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>C. Lisa Higgins</td> <td>627 S 400 W</td> <td>Heyburn</td> <td>ID</td> <td>83336</td> </tr> <tr> <td>Secretary</td> <td>C. Lisa Higgins</td> <td>(same)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>C. Lisa Higgins</td> <td>(same)</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	C. Lisa Higgins	627 S 400 W	Heyburn	ID	83336	Secretary	C. Lisa Higgins	(same)				Director	C. Lisa Higgins	(same)			
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Director	C. Lisa Higgins	(same)																								
5. Organized under the laws of: IDAHO C 29677	6. Signature <u>C. Lisa Higgins</u> Date <u>4/6/2007</u> Name (Typed or Printed) <u>C. Lisa Higgins</u> Title <u>President</u>																									

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 SECRETARY OF STATE
 STATE OF IDAHO

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