FILED EFFECTIVE

REINSTATEMENT

No. C 145869	**Annual Report Form** ADMIN DISSOLVED 01/07/2004	2. Registered Agent and Office **NOT A P.O. BOX**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **FEE DUE $30.00**	1 Mailing Address - Correction this box, if applicable LILJENQUIST ENTERPRISES INC. ~~510 E 17TH ST #299~~ 329 S Woodruff Ave IDAHO FALLS, ID ~~83404~~ 83401	JOHN R LILJENQUIST ~~1315 RIDGEWOOD DR~~ 329 S Woodruff Ave ~~AMMON, ID 83406~~ Idaho Falls, ID 83401 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 ❑ **Managers** or ❑ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President:	John R Liljenquist	329 S Woodruff Ave, Idaho Falls, ID 83401			
Director:	John R Liljenquist	329 S Woodruff Ave, Idaho Falls, ID 83401			

2004 SEP -2 AM 11:10
SECRETARY OF STATE
STATE OF IDAHO

5. Organized under the laws of:
IDAHO
C 145869

6.
Signature _____ Date 8/26/04
Name (Typed or Printed) JOHN R LILJENQUIST Title PRESIDENT

Issued 08/12/2004 by MS1