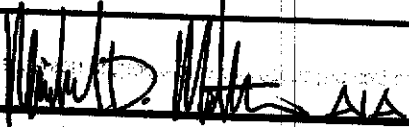


No. C 157205	Reinstatement Annual Report Form ADMIN DISSOLVED 02/04/2010		2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.		MICHAEL D MATTIAS AIA 109 S 4TH ST BELLEVUE ID 83313
REINSTATEMENT FEE DUE: \$30.00	AFTERHOURS DESIGN, PA P O BOX 1733 HAILEY ID 83333		3. New Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.			
Office Held	Name	Street or PO Address	City State Country Postal Code
PRESIDENT,	MICHAEL D. MATTIAS,	109 S. 4TH ST.,	BELLEVUE, ID, BLAINE, 83313
SEC./TRES.,	P. AMBER MATTIAS,	109 S. 4TH ST.,	BELLEVUE, ID, BLAINE, 83313
5. Organized Under the Laws of:			
IDAHO C 157205		6. Signature:  AIA Date: 3/1/10	
		Name (type or print): MICHAEL D. MATTIAS, AIA Title: PRES.	
Issued 02/25/2010 by SLD			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM