| No. C 161336 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | Reinstatement Annual Report Form ADMIN DISSOLVED 10/06/2009 | 2. Registered Agent and Office (NOT A P.O. BOX) SHERYL J RINAURO |
|---|--|--|
| | Mailing Address: Correct in this box if needed. | 1157 N TALLGRASS LN |
| | 1. Flaming Address: Correct in this box if fieeded. | POST FALLS ID 83854 |
| | RINAURO PAINTING & WALLPAPERING INC | |
| • | 1157 N TALLGRASS LN | 3. New Registered Agent Signature. |
| | POST FALLS ID 83854 | |
| REINSTATEMENT PEE DUE: \$30.00 | | |
| | A Division Address of Developer | and/orthograft Transpurser |
| 4. Corporations: Enter Nam Office Held Nam | es and Business Addresses of President, Secretary, Directors Street or PO Address | City State Country Postal Code: |
| | and the Other Heart Co | / 0.4- E. 633C |
| I resident in | march Kinauro 115/10/ Aller | assin test falls 10 03001 |
| Secretary She | andall Rinauro 1157 NT Allgrass En Pe | st Falls ID Kootanai 83854 |
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| 5. Organized Under the Lav | vs of: 6. | |
| | Signature: The What Cha | Date: 13-55.00 |
| IDAHO | A STATE OF THE STA | 18 13:07 |
| C 161336 | Name (type or print): Sherry J Ri | Muro Title: Sec. |
| Issued 12/10/2009 by SL1 | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. **Print** or type the name of the signer below the signature.