No. C 153070	Reinstatement Annual Report Form ADMIN DISSOLVED 05/05/2010	2. Registered Agent and Office **(NOT A P.O. BOX)** ANDREA J HANSEN SORENSEN 3035 W REGAN AVE BOISE ID 83702
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 **REINSTATEMENT** **FEE DUE:** $30.00	**1. Mailing Address: Correct in this box if needed.** STRATEGICOM, INC. ANDREA J HANSEN SORENSEN ~~3035 W REGAN AVE~~ ~~BOISE ID 83702~~ 5002 W Emerald St. Boise, ID 83706	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
Pres	Andrea Sorensen	10694 Seneca	Boise	ID	Ada	83709
VP	Steven Todd Sorensen	same				
		10694 Seneca	Boise	ID	Ada	83709

5. Organized Under the Laws of:	6.
IDAHO C 153070	Signature: [signature] Date: 5-24-10 Name (type or print): Andrea Sorensen Title: Pres

Issued 05/10/2010 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