

|                                                                                                                                                        |               |                                                                                                                                                                          |            |                                                           |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------|---------------------|
| No. <b>C 102943</b>                                                                                                                                    |               | Due no later than Aug 31, 2014                                                                                                                                           |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>        |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ACE PRINTING, INC.<br>MIKE WOLTER<br>PO BOX 188<br>TWIN FALLS ID 83303 |            | MICHAEL C WOLTER<br>250 MAIN AVE N<br>TWIN FALLS ID 83301 |                     |
|                                                                                                                                                        |               |                                                                                                                                                                          |            | 3. <u>New</u> Registered Agent Signature:*                |                     |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |               |                                                                                                                                                                          |            |                                                           |                     |
| Office Held                                                                                                                                            | Name          | Street or PO Address                                                                                                                                                     | City       | State                                                     | Country Postal Code |
| PRESIDENT                                                                                                                                              | MIKE C WOLTER | 250 MAIN AVE N.                                                                                                                                                          | TWIN FALLS | ID                                                        | USA 83301           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 102943</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Mike Wolter<br>Name (type or print): Mike Wolter<br>Date: 09/10/2014<br>Title: President                                 |            |                                                           |                     |
| Processed 09/10/2014                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                |            |                                                           |                     |