

<p>No. C 97990</p>	<p>Due no later than Mar 31, 2009 Annual Report Form</p>		<p>E. Registered Agent and Office (Must be P.O. BOX) WILLIAM D. TYREE Tyree 502 6TH ST FILER ID 83328</p>																																			
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p>NO FILING FEE IF RECEIVED BY DUE DATE</p>	<p>1. Mailing Address: Correct in this box if needed. MAGIC VALLEY EXTINGUISHERS, INC. PO BOX 390 FILER ID 83328</p>		<p>3. Now Registered Agent Signature. William D. Tyree</p>																																			
<p>4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.</p> <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>William D Tyree</td> <td>502 6th ST</td> <td>Filer Id</td> <td></td> <td></td> <td>83328</td> </tr> <tr> <td>Secretary</td> <td>Shelly J. Tyree</td> <td>502 6th ST</td> <td>Filer Id</td> <td></td> <td></td> <td>83328</td> </tr> <tr> <td>Director</td> <td>William D Tyree</td> <td>502 6th ST</td> <td>Filer Id</td> <td></td> <td></td> <td>83328</td> </tr> <tr> <td>Director</td> <td>Shelly J. Tyree</td> <td>502 6th ST</td> <td>Filer Id</td> <td></td> <td></td> <td>83328</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	William D Tyree	502 6th ST	Filer Id			83328	Secretary	Shelly J. Tyree	502 6th ST	Filer Id			83328	Director	William D Tyree	502 6th ST	Filer Id			83328	Director	Shelly J. Tyree	502 6th ST	Filer Id			83328
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<p>5. Organized Under the Laws of:</p> <p>IDAHO C 97990</p>		<p>6. Signature: William D. Tyree Date: 4-3-09 Name (type or print): William D. Tyree Title: President</p>																																				
<p>Issued 04/03/2009 by KAH</p>			<p>200903001371</p>																																			