| No. <b>C 111415</b>   |                                     | Due no later than Jul 31, 2010 Annual Report Form  1. Mailing Address: Correct in this box if needed.  ADI - APPLIANCE DISTRIBUTING, INC.  HARVEY NEEF 5430 W STATE BOISE ID 83707 |                | 2. Registered Agent and Address (NO PO BOX)                                  |            |                          |  |
|---|-------------------------------------|--|----------------|--|------------|--------------------------|--|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | ADI - APPL<br>HARVEY N<br>5430 W ST |  |                | HARVEY NEEF 5430 W STATE BOISE ID 83707  3. New Registered Agent Signature:* |            |                          |  |
| NO FILING FEE IF RECEIVED BY DUE DATE   |                                     | of President, Secretary, and Directors. Treasi   |                |  |            |                          |  |
| Office Held Name  | Dusiness Addresses                  | Street or PO Address   | City           | State  | Country    | Postal Code              |  |
|   | . A NEEF<br>Y L NEEF                | 5430 W STATE STREET<br>5430 W STATE STREET   | BOISE<br>BOISE | ID<br>ID   | USA<br>USA | 83703-3336<br>83703-3336 |  |
| 5. Organized Under the Laws of:   | 6. Annual Re                        | 6. Annual Report must be signed.*  |                |  |            |                          |  |
| <b>ID</b> Signa   |                                     | Edwin Eijckelhof   |                | Date: 05/13/2010   |            |                          |  |
| C 111415  | Name (typ                           | Name (type or print): Edwin Eijckelhof   |                | Title: Controller  |            |                          |  |
| Processed 05/13/2010  | * Electronical                      | * Electronically provided signatures are accepted as original signatures.  |                |  |            |                          |  |