

No. C 186649	Due no later than Mar 31, 2011 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. A PERFECT FIT, INC. SAMUEL H BARKER 844 N WASHINGTON STE 400 TWIN FALLS ID 83301	SAMUEL H BARKER 844 N WASHINGTON STE 400 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	SAMUEL H BARKER	1425 ANNY DR W	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID C 186649	6. Annual Report must be signed.* Signature: Samuel H Barker Name (type or print): Samuel H Barker		Date: 04/06/2011 Title: President			
Processed 04/06/2011		* Electronically provided signatures are accepted as original signatures.				