

No. C 107145		Due no later than Jul 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SHOCKWAVE, INC. MARK L SHOCKEY 377 E 200 S BURLEY ID 83318		MARK L SHOCKEY 377 E 200 S BURLEY ID 83318			
				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	
SECRETARY	CARLA SHOCKEY	377 E 200 S	BURLEY	ID	USA	83318	
PRESIDENT	MARK L SHOCKEY	377 E 200 S	BURLEY	ID	USA	83318	
5. Organized Under the Laws of: ID C 107145		6. Annual Report must be signed.* Signature: Mark L Shockey Name (type or print): Mark L Shockey					
		Date: 06/11/2016 Title: President					
Processed 06/11/2016		* Electronically provided signatures are accepted as original signatures.					