

| No. C 83353 | Annual Report Form 1996 Due No Later Than November 30, | | 2. Registered Agent and Office NOT A P.O. BOX | | | | | | | | | | | | | | | | | | | |
|--|---|------------------------|--|-------|-------------|------|------------------------|------|-------|-----|-----------|----------------|------------------|--------------|--|-------|----------|---------------|----------------|--------------|--|-------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * | 1. Mailing Address - Please Correct, if Not Correct MAID FOR YOU INC. PEGGY EVERIST 7525 BASCO LANE MERIDIAN ID 83642 | | PEGGY EVERIST 7525 BASCO LANE MERIDIAN ID 83642 3. Organized Under the Laws of: ID C 83353 | | | | | | | | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" data-bbox="80 345 1523 505"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>MARY Steinbach</td> <td>4924 N. Blackcat</td> <td>Meridian, Id</td> <td></td> <td>83642</td> </tr> <tr> <td>U. Pres.</td> <td>Peggy Everist</td> <td>7525 BASCO Ln.</td> <td>Meridian, Id</td> <td></td> <td>83642</td> </tr> </tbody> </table> | | | | | Office held | Name | Street or P.O. Address | City | State | Zip | President | MARY Steinbach | 4924 N. Blackcat | Meridian, Id | | 83642 | U. Pres. | Peggy Everist | 7525 BASCO Ln. | Meridian, Id | | 83642 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | | | |
| President | MARY Steinbach | 4924 N. Blackcat | Meridian, Id | | 83642 | | | | | | | | | | | | | | | | | |
| U. Pres. | Peggy Everist | 7525 BASCO Ln. | Meridian, Id | | 83642 | | | | | | | | | | | | | | | | | |
| 5. NATURE OF BUSINESS RESIDENTIAL HOUSECLEANING | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Mary Steinbach</u> Date <u>9-17-96</u> Name (Typed or Printed) <u>Mary Steinbach</u> Title <u>owner-Pres</u> | | | | | | | | | | | | | | | | | | | | | |

ISSUED: 07-06-1995

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