No. C 55573		Due no later than May 31, 2016	2. Registered Agent and Address (NO PO BOX) REMY TOMCHAK 432 SHOUP AVE IDAHO FALLS ID 83402 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. O'BRIEN TOMCHAK AND CO., CHARTERED REMY TOMCHAK P.O. BOX 50858 IDAHO FALLS ID 83405-0858				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ess Addresses of President, Secretary, and Directors. Treasurer	(ontional)			
	Name	Street or PO Address	City	State	Country	Postal Code
W. C.	REMY TOMO CHARLES MA		IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83404 83406
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 55573		Signature: REMY TOMCHAK Date: 03/21/2016				
		Name (type or print): REMY TOMCHAK		Title: PRESIDENT		
Processed 03/21/2016	* Electronically provided signatures are accepted as original signatures.					