| No. <b>C 91300</b>                                                                  |                                                           |                                                                                                                                                         | Due no later than Jan 31, 2018                                                         |                                                                                      | 2. Registered Agent and Address (NO PO BOX) |                                 |                                           |  |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------|-------------------------------------------|--|
| 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.  M.J.K. ENTERPRISES, INC.  KARLA K. ROSA  5625 E. WILDHORSE LANE  BOISE ID 83712 |                                                                                        | KARLA K ROSA 5625 E WILDHORSE LN BOISE ID 83712  3. New Registered Agent Signature:* |                                             |                                 |                                           |  |
| RECEIVED BY DUE DATE                                                                |                                                           | iness Addresse                                                                                                                                          | s of President, Secretary, and Directors. Treasur                                      | er (ontional)                                                                        |                                             |                                 |                                           |  |
| Office Held                                                                         | Name                                                      | mess madresse.                                                                                                                                          | Street or PO Address                                                                   | City                                                                                 | State                                       | Country                         | Postal Code                               |  |
| DIRECTOR SECRETARY PRESIDENT DIRECTOR DIRECTOR                                      | MARK ROS<br>JANET RO<br>KARLA K.<br>JANET RO<br>KARLA K I | E<br>ROSA<br>E                                                                                                                                          | P.O. BOX 634 P.O. BOX 2100 5625 E. WILDHORSE LANE P.O. BOX 2100 5625 E. WILDHORSE LANE | HEYBURN<br>TWIN FALLS<br>BOISE<br>TWIN FALLS<br>BOISE                                | ID<br>ID<br>ID<br>ID<br>ID                  | USA<br>USA<br>USA<br>USA<br>USA | 83336<br>83303<br>83712<br>83303<br>83712 |  |
| 5. Organized Under the Laws of:                                                     |                                                           | 6. Annual Re                                                                                                                                            | eport must be signed.*                                                                 |                                                                                      |                                             |                                 |                                           |  |
| ID<br>C 91300                                                                       |                                                           |                                                                                                                                                         | Signature: Karla Rosa<br>Name (type or print): Karla Rosa                              |                                                                                      | Date: 12/06/2017 Title: President           |                                 |                                           |  |
| Processed 12/06/2017                                                                |                                                           | * Electronica                                                                                                                                           | lly provided signatures are accepted as original s                                     | signatures.                                                                          |                                             |                                 |                                           |  |