No. C 39182	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015	2. Registered Agent and Office **(NOT A P.O. BOX)** JOHN PAULUCCI 524 MAIN STREET LEWISTON ID 83501
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. **Mailing Address: Correct in this box if needed.** PAULUCCI'S INC. ~~JOHN PAULUCCI~~ c/o Michael Duncan ~~524 MAIN~~ PO Box 2191 LEWISTON ID 83501	3. New Registered Agent Signature.
REINSTATEMENT FEE **DUE:** $30.00		

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	John Paulucci	524 Main St	Lewiston	ID	USA	83501

5. Organized Under the Laws of:	6.
IDAHO C 39182	Signature: [signature] Date: 4/28/2015 Name (type or print): John Paulucci Title: President

Issued 04/28/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct