


No. W 107063		Reinstatement Annual Report Form ADMIN DISSOLVED 12/20/2016		2. Registered Agent and Office (NOT A P.O. BOX) ATABEK SHOKIROV 2880 CHERRY LANE APT A#103 BOISE ID 83705	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. A N A TRANSPORT LLC ATABEK SHOKIROV 2880 W CHERRY LN 301 Overland Rd APT A #103 STE 102 BOISE ID 83705		3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager or Member		Name		Street or PO Address	
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		Atabek Shokirov		2880 Cherry Lane Apt A #103	
Manager <input type="checkbox"/> Member <input type="checkbox"/>		Boise, ID		83705	
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of:		6. Signature:		Date:	
IDAHO W 107063				4/19/2017	
		Name (type or print):		Title:	
		Atabek Shokirov		member	
Issued 04/19/2017 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM