

|                                                                                                                                                        |                    |                                                                                                                                                              |            |                                                               |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>C 117607</b>                                                                                                                                    |                    | <b>Due no later than Dec 31, 2009</b>                                                                                                                        |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>EVERYBODY'S BUSINESS, INC.<br>DEBRA W JOHNSON<br>1277 POLE LINE RD E<br>TWIN FALLS ID 83301 |            | DEBRA N JOHNSON<br>1277 POLE LINE RD E<br>TWIN FALLS ID 83301 |         |             |  |
|                                                                                                                                                        |                    |                                                                                                                                                              |            | 3. <u>New</u> Registered Agent Signature:*                    |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                    |                                                                                                                                                              |            |                                                               |         |             |  |
| Office Held                                                                                                                                            | Name               | Street or PO Address                                                                                                                                         | City       | State                                                         | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | DEBRA W JOHNSON    | 3481 NORTH 2983 EAST                                                                                                                                         | TWIN FALLS | ID                                                            | USA     | 83301       |  |
| SECRETARY                                                                                                                                              | LAWRENCE J JOHNSON | 3481 NORTH 2983 EAST                                                                                                                                         | TWIN FALLS | ID                                                            | USA     | 83301       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 117607</b>                                                                                          |                    | 6. Annual Report must be signed.*<br>Signature: Debra W Johnson<br>Name (type or print): Debra W Johnson<br>Date: 10/30/2009<br>Title: President             |            |                                                               |         |             |  |
| Processed 10/30/2009                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                                    |            |                                                               |         |             |  |