

No. C 90107	Annual Report Form 1998 Due No Later Than November 30.		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		D. JOSEPH MIRE NORTH 907 FIFTH AVENUE																			
	MIRE INC. D. JOSEPH MIRE NORTH 907 FIFTH AVENUE SANDPOINT ID 83864		SANDPOINT ID 83864 3. Organized Under the Laws of: ID C 90107																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>D. Joseph Mire</td> <td>N. 907 5th</td> <td>Sandpoint</td> <td>ID</td> <td>83864</td> </tr> <tr> <td>Secretary</td> <td>Leig L Mire</td> <td>N. 907 5th</td> <td>Sandpoint</td> <td>ID</td> <td>83864</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	D. Joseph Mire	N. 907 5 th	Sandpoint	ID	83864	Secretary	Leig L Mire	N. 907 5 th	Sandpoint	ID	83864
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Secretary	Leig L Mire	N. 907 5 th	Sandpoint	ID	83864																	
5. Signature of New Registered Agent		6. Signature <u><i>D. Joseph Mire</i></u> Date <u><i>Dec.</i></u> Name (Typed or Printed) <u><i>D. Joseph Mire</i></u> Title <u><i>President</i></u>																				

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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