No. C 195429	Reinstatement Annual Report Form ADMIN DISSOLVED 10/11/2013	2. Registered Agent and Office **(NOT A P.O. BOX)** JOHN KAHORA 4016 W TARGEE BOISE ID 83705
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.** BEACHLAND EXPRESS INC. PO BOX 5671 BOISE ID 83705	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/OWNER	JOHN KAHORA	P.O. BOX 5671	BOISE	ID	USA	83705

5. Organized Under the Laws of:	6.
IDAHO C 195429	Signature: John Kahora Name (type or print): JOHN KAHORA Date: 12/18/2013 Title: OWNER

Issued 12/18/2013 by JAH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM