

|  |               |  |            |   |         |  |  |
|--|---------------|--|------------|---|---------|--|--|
| No. <b>C 180735</b>  |               | <b>Due no later than Nov 30, 2011</b>  |            | <b>Annual Report Form</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>COMPLETE CONSTRUCTION, INC.<br>SHAE R MAYNER<br>PO BOX 2615<br>TWIN FALLS ID 83303<br>USA |            | ALL DAY \$49 IDAHO REGISTERED A<br>105 S 6TH STE A<br>COEUR D ALENE ID 83814<br>USA |         | 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  | SHAE R MAYNER | P.O. BOX 2615  | TWIN FALLS | ID  | USA     | 83303  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 180735</b>  |               | 6. Annual Report must be signed.*<br>Signature: Shae Mayner<br>Name (type or print): Shae Mayner<br>Date: 09/13/2011<br>Title: President               |            |   |         |  |  |
| Processed 09/13/2011   |               | * Electronically provided signatures are accepted as original signatures.  |            |   |         |  |  |