

No. <b>C 143975</b>	<b>Due no later than May 31, 2004</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<b>DIVERSIFIED SERVICES, INC.</b>  1324 MAPLE AVE  COEUR D'ALENE, ID 83814	JIM WASSON 1324 MAPLE AVE  COEUR D'ALENE, ID 83814																		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.																				
<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>JAMES WASSON</td><td>1324 MAPLE AVE</td><td>CDA</td><td>ID</td><td>83814</td></tr><tr><td>SECRETARY</td><td>KRISTA WASSON</td><td>&gt;&gt; &gt;&gt;</td><td>CDA</td><td>ID</td><td>83814</td></tr></tbody></table>	Office held	Name	Street or P.O. Address	City	State	Zip	President	JAMES WASSON	1324 MAPLE AVE	CDA	ID	83814	SECRETARY	KRISTA WASSON	>> >>	CDA	ID	83814		
Office held	Name	Street or P.O. Address	City	State	Zip															
President	JAMES WASSON	1324 MAPLE AVE	CDA	ID	83814															
SECRETARY	KRISTA WASSON	>> >>	CDA	ID	83814															
5. Organized Under the Laws of:  IDAHO C 143975	6. Signature <u>James Wasson</u> Date <u>6-4-04</u> Name <u>JAMES WASSON</u> Title <u>PRESIDENT</u>																			

Issued 06/04/2004

Do Not Tape or Staple

Fold, seal and mail this portion.

Detach at this perforation and discard this lower portion.

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**BLOCK 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1

**BLOCK 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

**BLOCK 3:** Only a new registered agent must sign in Block 2.

**BLOCK 4:** Enter names and business addresses of president, secretary and directors (for corporations only) or managers/members (for LLC's only). Note: Putting "same as last year" or "same as above" will not be accepted. Changes here will not affect the address in Block 1.

**BLOCK 5:** May not be altered through the use of this form.

**BLOCK 6:** The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.

\*\* The image of this form will be available on the internet once it is filed. **DO NOT** enter Social Security Numbers.

If the (corporation/Limited Liability Company) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at [www.idsos.state.id.us](http://www.idsos.state.id.us). However, if no timely annual report is filed, administrative action will be taken, at no cost to the (corporation/Limited Liability Company), to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

**POSTMARK DATES WILL NOT BE ACCEPTED**