|                                      | Annual Report Form   |   |
|--------------------------------------|--|---|
| Return to:                           | Due No Later Than November 30  | 2. Registered Agent and Office NOT A P.O. BOX |
| SECRETARY OF STATE                   | 1. Mailing Address - Please Correct, If Not Correct  | STEVEN M BRAVO                                |
| 700 WEST JEFFERSON                   | T=7500 Cures   | 1510 E FIRST ST                               |
| PO BOX 83720<br>BOISE, ID 83720-0080 | T-ZERS SHIRT SHOP, INC.  | 2 12 13 1 3 1                                 |
| NO FEE REQUIRED                      |  | MERIDIAN ID 83642                             |
|                                      | 1510 E 1ST ST# 151   |   |
| * FIRST NOTICE *                     | MERTOTAN   | 3. Organized Under the Laws of:               |
| Corporations: Enter Names and        | Punimara A i d   | ID C101392                                    |
| Limited Liability Companies: Enti    | Pusifiess Addresses of President, Secretary and Directors or Names and Addresses of   Managers or  Members | C101392                                       |
| Office had t                         | Managers or Members  | (check one)                                   |
|                                      | Street or P.O. Address   | Cie   |
| SERETARY JAIME F                     | Street or P.O. Address  R. BRAVO 3610 MOORE ST   | <u>City State Zip</u>                         |
| ,                                    | 3610 MOORE ST  | Boise Id 83703                                |
| Parcelost STEVE                      | () () ()   | ,   |
| resident - 1200                      | UM BRAUD 3715W, PINE   | MERIDIAN IL. 83642                            |
|                                      | •  | 140 1d, 85642                                 |
| Signature of New Registered A        | Signature Mr. Bru  Name (Typed or STEVEN M. RR   | AVO - Po - 1                                  |
| 1820ED: 07-03-19                     |  | TITLE / RESIDENT                              |
|                                      | DO NOT TAPE OR STAPLE  | 15283   |
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Annual Report Form