No. C 193645	Reinstatement Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	ADMIN DISSOLVED 05/14/2014 1. Mailing Address: Correct in this box if needed. QT&B, INC. 896 NORTH 1600 EAST PRESTON ID 83263	TIMOTHY JOHN THORPE 896 NORTH 1600 EAST PRESTON ID 83263
REINSTATEMENT FEE DUE: \$30,00		3. New Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.		
Office Held	Name Street or PO Address City	
Prosaut	Timothy Thanks 896016008 Pre	28ton 10 Franklin 83963
Secretary.	Timothy Thompe 8960 1600E Pres Jod: Marpe 8960 1600E Pres	Sten 10 Franklin 83263
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5. Organized Under the La		
IDAHO	Signature:	Date:
C 193645	Name (type or print):	
	Irdi Thorac	Secretary
Issued 06/23/2014 by onlin	e	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM