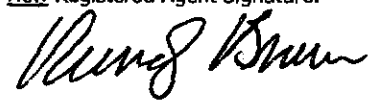





No. <b>C 168320</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 11/08/2007</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) RANDY D BROWN 6565 W TOBI DR BOISE ID 83714									
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT</b> <b>FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed.  BRUSH WORKS, INC.  6565 W TOBI DR BOISE ID 83714		3. New Registered Agent Signature. 									
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.												
Office Held	Name	Street or PO Address	City	State Country Postal Code								
PRESIDENT	RANDY BROWN	6565 W. TOBI	BOISE ID	AOA 83714								
Vice Pres.	PAUL GLENN	1790 CALCITE,	MERIDIAN ID	AOA 83642								
5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>C 168320</b> </div>		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Signature:</td> <td style="width: 40%;"></td> <td style="width: 30%;">Date:</td> <td style="width: 10%;">6/25/11</td> </tr> <tr> <td>Name (type or print):</td> <td>RANDY BROWN</td> <td>Title:</td> <td>OWNER PRES</td> </tr> </table>			Signature:		Date:	6/25/11	Name (type or print):	RANDY BROWN	Title:	OWNER PRES
Signature:		Date:	6/25/11									
Name (type or print):	RANDY BROWN	Title:	OWNER PRES									
Issued 06/17/2011 by SLD												

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct 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.