

No. C 176296	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2013		2. Registered Agent and Office (NOT A P.O. BOX)														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83770-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. PLUMBER, INC. (THE) MICHAEL T SPEARS PO BOX 2195 IDAHO FALLS ID 83403 USA		MICHAEL T SPEARS 205 STILLWATER IDAHO FALLS ID 83404														
			3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>MICHAEL SPEARS</td> <td>PO BOX 2195</td> <td>IDAHO FALLS</td> <td>ID</td> <td>USA</td> <td>83403</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRESIDENT	MICHAEL SPEARS	PO BOX 2195	IDAHO FALLS	ID	USA	83403
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
PRESIDENT	MICHAEL SPEARS	PO BOX 2195	IDAHO FALLS	ID	USA	83403											
5. Organized Under the Laws of: IDAHO C 176296		6. Signature:  Name (type or print): <u>MICHAEL SPEARS</u> Date: <u>3-13-13</u> Title: <u>PRESIDENT</u>															