| No. <b>C 92304</b>                                                                                                |                                                                                               | Due no later than May 31, 2018                                                                                               |                  | 2. Registered Agent and Address (NO PO BOX) |          |            |                |  |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------|----------|------------|----------------|--|
| Return to:                                                                                                        |                                                                                               | Annual Report Form                                                                                                           |                  | JIM TODESCHI                                |          |            |                |  |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE    |                                                                                               | 1. Mailing Address: Correct in this box if needed.  GEMTONE, INC.  JAMES R TODESCHI  1161 W RIVER ST STE 260  BOISE ID 83702 |                  | 1161 W RIVER ST STE 260 BOISE ID 83702      |          |            |                |  |
|                                                                                                                   |                                                                                               |                                                                                                                              |                  | 3. <u>New</u> Registered Agent Signature:*  |          |            |                |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). |                                                                                               |                                                                                                                              |                  |                                             |          |            |                |  |
| Office Held                                                                                                       | Name                                                                                          | Street or PO Address                                                                                                         |                  | City                                        | State    | Country    | Postal Code    |  |
| DIRECTOR<br>DIRECTOR                                                                                              |                                                                                               |                                                                                                                              | ET<br>NE         | BOISE<br>EAGLE                              | ID<br>ID | USA<br>USA | 83705<br>83616 |  |
| 5. Organized Under the Laws of:                                                                                   |                                                                                               | 6. Annual Report must be signed.*                                                                                            |                  |                                             |          |            |                |  |
| ID<br>C 92304                                                                                                     |                                                                                               | Signature: James R Todeschi                                                                                                  | Date: 03/19/2018 |                                             |          |            |                |  |
|                                                                                                                   |                                                                                               | Name (type or print): James R Todeschi                                                                                       | Title: CPA       |                                             |          |            |                |  |
| Processed 03/19/2018                                                                                              | rocessed 03/19/2018 * Electronically provided signatures are accepted as original signatures. |                                                                                                                              |                  |                                             |          |            |                |  |