

No. <b>C 79069</b>	<b>Due no later than Jul 31, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  HELICORP JOHN NIELSEN 5130 N LAKEMONT LANE BOISE ID 83714		JOHN H NIELSEN 5130 N LAKEMONT LANE BOISE ID 83714			
			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
SECRETARY	SHARON R. NIELSEN	5130 N LAKEMONT LN.	BOISE	ID	USA	83714
PRESIDENT	JOHN H. NIELSEN	5130 N LAKEMONT LN.	BOISE	ID	USA	83714
TREASURER	JOHN H. NIELSEN	5130 N LAKEMONT LN.	BOISE	ID	USA	83714
DIRECTOR	JOHN H. NIELSEN	5130 N LAKEMONT LN.	BOISE	ID	USA	83714
5. Organized Under the Laws of:  <b>ID C 79069</b>	6. Annual Report must be signed.* Signature: John Nielsen Name (type or print): John Nielsen		Date: 05/10/2012 Title: President			
Processed 05/10/2012		* Electronically provided signatures are accepted as original signatures.				