

FILED EFFECTIVE

No. C 155309	Reinstatement Annual Report Form ADMIN DISSOLVED 09/08/2009		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 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. POMERELLE PORTRAIT DESIGN STUDIOS- BOISE, INC. ROBERT J MALONEY 260 CARPENTER LN N <i>119 2nd Ave. West</i> TWIN FALLS ID 83301 <i>Twin falls ID 83301</i>		ROBERT J MALONEY 119 2ND AVE W TWIN FALLS ID 83301	
			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
<i>President Robert Maloney PO Box 2723 Twin Falls ID 83303</i> <i>Sec. Janell Maloney PO Box 2723 Twin falls ID 83303</i>				
5. Organized Under the Laws of: IDAHO C 155309		6. <i>[Signature]</i> <i>12-9-09</i> Signature: _____ Date: _____ <i>Janell Maloney</i> Name (type or print): _____ Title: <i>Sec.</i>		
Issued 12/04/2009 by LJM				