

No. C 90107		Due no later than Aug 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. MIRE INC. DONALD J MIRE NORTH 907 FIFTH AVENUE SANDPOINT ID 83864		D. JOSEPH MIRE NORTH 907 FIFTH AVENUE SANDPOINT ID 83864			
						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	
PRESIDENT	DONALD J MIRE	1585 SPADES ROAD	SAGLE	ID	USA	83860	
SECRETARY	LEIGH S MIRE	1585 SPADES ROAD	SAGLE	ID	USA	83860	
5. Organized Under the Laws of: ID C 90107		6. Annual Report must be signed.* Signature: D JOSEPH MIRE Name (type or print): D JOSEPH MIRE					
Processed 09/17/2015		* Electronically provided signatures are accepted as original signatures. Date: 09/17/2015 Title: PRESIDENT					