					
No. C 163876	Due no later than Dec 31, 2011	2. Registered Agent and Office (NOT A P.O. BOX)			
Return to:	Annual Report Form	VALERIE S TUCKER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	18395 HWY 20/26			
450 N 4th STREET	10 STREAMS ENTERPRISES, INC.	CALDWELL ID 83607			
PO BOX 83720 BOISE, ID 83720-0080	VALERIE S TUCKER				
DOISE, 1D 65720 0000	PO BOX 148	2 New Posistanad Agent Cinesture			
NO FT! 7NO FEE TE	NOTUS ID 83656	3. New Registered Agent Signature.			
NO FILING FEE IF RECEIVED BY DUE		, , , , , , , , , , , , , , , , , , ,			
DATE		·			
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Postal					
Office Held Nar	ne Street or PO Address	City State Country Code			
IP. MONIN A. WICKER P.O. DOP 198 NOTES JU. CANON 83650					
Office Held Name Street or PO Address City State Country Postal Code Res Melvin A. Lucker P.O. Bop 148 Norths ID. Caryon 83654 Vice Pres Valerie S. Tucker P.B. BX 148 Norths ID. Caryon 83654 Secretary Jahrie S. Tucker P.B. BX 148 Norths ID. Caryon 83654 H TREASURER Both person Named Shoren 8180 directors					
			+ TREASURER 3 11 00 - 11 Manual Shore The soles dipontars		
			of Kensum 24 Doctor Manual Shower & 81 81 CIRCLETONS		
DOTAL PRESON MANUEL COUNTY OF SO CHACKED					
5. Organized Under the Laws	of: 6.				
75.44.0	Signature: (d(syr)	Date: 15-11			
IDAHO		(A-D)			
C 163876	Name (type or print): \ dene hee	Ker Title: VKC FRAS			
Issued 12/01/2011 by KAH		117518			
INCTDUCTIONS FOR THE IDAMO ANNIAL DEPORT FORM					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be