

No. <b>C 206498</b>		<b>Due no later than Jul 31, 2018</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  ONE VISION, INC. KATHLEEN ROMA, CPA 776 E. RIVERSIDE DRIVE SUITE 240 EAGLE ID 83616		KATHLEEN ROMA CPA 776 E. RIVERSIDE DRIVE SUITE 240 EAGLE ID 83616			
				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	ADAM HAGAMAN	1892 N. FOU DY AVENUE	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  <b>ID C 206498</b>		6. Annual Report must be signed.* Signature: Adam Hagaman Name (type or print): Adam Hagaman			Date: 06/04/2018 Title: President		
Processed 06/04/2018		* Electronically provided signatures are accepted as original signatures.					