No. <b>C 192555</b>		Due no later than Oct 31, 2013 Annual Report Form  1. Mailing Address: Correct in this box if needed.  COMEDY 4A CURE INC JYL ADAMS 596 W OAKHAMPTON DRIVE EAGLE ID 83616		2. Registered	2. Registered Agent and Address (NO PO BOX)  ANGELA MILLIGAN 6495 S ZITHER PL BOISE ID 83709  3. New Registered Agent Signature:*			
Return to:				ANGELA M				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				BOISE ID				
NO FILIN RECEIVED BY	DUE DATE	nose Addresses s	f Dracident Corretory and Directors Trace	ocurer (entional)				
Office Held	Name	less Addresses C	f President, Secretary, and Directors. Trea Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	ANGELA MI	LLIGAN	6495 S ZITHER PLACE	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: Jyl Adams			Date: 09/02	/2013		
C 192555		Name (type or print): Jyl Adams			Title: Treasurer			
Processed 09/02/201	.3	* Electronically	provided signatures are accepted as origin	nal signatures.				