No. C 36727	1	Due no later than August 31, 2006 Annual Report Form 1. Mailing Address - Correct in this box, if applicable NONPAREIL DEHYDRATED POTATOES, INC. 40 NORTH 400 WEST, GROVELAND RD BLACKFOOT, ID 83221			2. Registered Agent and Office NO PO BOX CHRIS ABEND 40 NORTH 400 WEST, GROVELAND RD BLACKFOOT, ID 83221	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - C NONPAREIL DEHYDRATE 40 NORTH 400 WEST GR					
NO FILING FEE IF RECEIVED BY DUE DATE				New Registered Age	nt Signature	
 Corporations: Enter Nar 	nes and Business Addre	sses of President, Se	cretary an	d Directors.		
Office held Name	Street or P.O. Ad	dress	<u>City</u>	State	<u>Zip</u>	
President Chris	topher T Abend	40 N 400 W	Black	cfoot ID	83221	
Secretary Eilee	n Abend	130 N 400 We	est B	lackfoot ID	83221	
Director Randi	Phillips	130 N 400 W	В	lackfoot I	D 83221	
			// /	7		
5. Organized Under the Laws of: IDAHO_	6. Signature	1 1 / mm mm		Date		
C 36727	Name (Typed or Printed)	Name Printed Christopher T. Ab			ident	
Issued 06/01/2006	Do N	Do Not Tape or Staple		200608003510		

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