



Idaho Corporation Annual Report Form

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Due no later than: 04/30/2021

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

| Allitual Napolt. No liling les il lecelved by the due date. | | | | e, ID 83720 ne: (208) 334-2300 | 14/2 | |
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| SOS Control i | Number: 178114 | Filing Status: Active-Good | Filing Status: Active-Good Standing | | | |
| General Business Corporation (D) | | Date Formed: 04/26/1977 | Form | nation Locale: ID | 21 | |
| | iling Address: JFACTURING JEWELE | | (1) Add or Change Mailing Address: | | | |
| STE B | | | | | <u> </u> | |
| 9225 W CHINI | DEN BLVD | | | | ω _ | |
| BOISE, ID 83 | 714-1533 | | | | РМ | |
| Registered Ag | gent (RA) and Register | ed Office (RO) Address: | (2) Change PA s | und/or RO Address: | ਨ 0 | |
| WILLIAM J MA | ARRS | , , | (z) Onlinge IVA | ilid/of NO Address. | Ö O | |
| | DEN BLVD STE B | | | | Ť. | |
| BOISE, ID 83 | 714 | | | | i ve | |
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| | Note: The Reg | istered Office address must be a physica | I Idaho address | s (no postal box). | γ̈́ | |
| (2) Nove Bosis | _ | · · | | | н | |
| (3) New Regis | tered Agent (RA) Sign | If a new agent is appointed in item | (2) above, the ne | w agent must sign here to a | accept the appointment. | |
| (4) Corporations: | Enter names and business ad | dresses (with zip code) of the President, Vic | ce President, Se | cretary, Treasurer. | Ŋ | |
| Title | Name | Business Address | Business Address | | City, State, Zip | |
| PRESIDENT | WILLIAM J. MARG | es 9325 CHINDEN BLVD | SE B | BOISE THAT | 83714-1533 | |
| VICE POSILON CHARLES 5. MARR | | | SEB | BOXE INAH | | |
| | | | | | - ' | |
| (5) Board of Direct | tors names and business add | resses (with zip code). Attach additional she | eet if necessary. | <u> </u> | 0 | |
| | | Business Address | | City, State, Zip | | |
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| <u> </u> | MALL C | 1 | | 1 | | |
| (5) Signature: | ////////////////////////////////////// | - (| (6) Date: | 4-12-21 | en c | |
| (7) Type/Print Nan | ne: 11114 in | | | | Ū. | |
| (-) .)ken minimu | ne: WILLIAM J. | MAROS (| (J) 1140. | ES DEST | — D | |
| instructions: Le | gibly complete the form above | e. Sign and date this form and return to the a | address provided | l above. | , en | |