



Idaho Corporation Annual Report Form

File online at: sos.idaho.gov

Due no later than: 01/31/2020

Return completed form within 30 days to idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports

Annu	al Report: No filing fe	e if receiv	ed by the due date.	450 Bois	North 4th Street e, ID 83720 ne: (208) 334-2300	32/ NP.	
SOS Control Number: 388769			Filing Status: Active-Good Standing)
General Business Corporation (D)			Date Formed: 01/04/1999 Form		nation Locale: ID		9
Name and Mailing Address: FORKLIFT DOCTOR, INC. 15660 RIVERSIDE RD CALDWELL, ID 83607-9628			(1) Add or Change Mailing Address:				9:59 AM
Registered A JOE A WITHE	gent (RA) and Registe	red Offic	e (RO) Address:	(2) Change RA a	and/or RO Address:] ! !
15660 RIVERSIDE RD CALDWELL, ID 83607							
(3) New Regis			fice address must be a p	en e	s (no postal box). w agent must sign here to acc	cept the appointment	:
(4) Corporations:	Enter names and business a	addresses (v	vith zip code) of the Preside	ent, Vice President, Se	cretary, Treasurer.	<u>o</u>	•
Title	Name		Business Address		City, State, Zip	<u></u>	
PRESIZW Vice-Pres	ARVINA Zym Withe			side RAZ Prside RAZ	CAIQUEIT, ID.	83607 B	<u>-</u>
(5) Board of Direct	ctors names and business ad	dresses (wit	 h zip code). Attach additio	nal sheet if necessary.			,— h
Name		Busine	ss Address		City, State, Zip	State e	-
(5) Signature:	ne Joe With	er s no	ov.	(6) Date: //2	30/2020 5ièera	all ence	
Instructions: Le	egibly complete the form abov	e. Sign and	date this form and return t	o the address provided	l above.	e 17.	