| No. | No. C 151432 | | Due no later than October 31, 2008 Annual Report Form 1. Mailing Address - Correct in this box. if applicable ARO TESTING, INC. 3410 HWY 95 PARMA, ID 83660 | | 2. Registered Agent and Office NO PO BOX ALMA OLSEN 3410 HWY 95 PARMA, ID 83660 3. New Registered Agent Signature | |
|---|---------------------------------|----------|--|----------------------|---|---------------------|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 63720 BOISE, ID 83720-0080 | | REET ARG | | | | |
| | ILING FEE IF IVED BY DUE DAT | /E | | -ident Socreton | and Directors | |
| Off | lice held Name | | and Business Addresses of Pre Street or P.O. Address 3410 Huy 95 | <u>City</u> Perma | state 10 | <u>Zip</u> 8∋660 |
| Secre | etany Jame | Olsen | 3410 Huy 95 3410 Huy 95 | Parma | i ID | 8 3660 |
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| 5. Orga | anized Under the Law | s of: | 6. Signature Dania OL | En Decentary | en Date 8/ | 120/08 |