No. C 119144	Reinstatement Annual Report Form ADMIN DISSOLVED 07/06/2007 1. Mailing Address: Correct in this box if needed.		P.O. BOX) BOB ROBE	2. Registered Agent and Office (NOT A P.C. BOX) BOB ROBERTS 1487 FILLMORE ST STE C TWIN FALLSID83301		
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080						
	ELITE, INC. BOB ROBERTS PO BOX 5739 2058 Overland Avenue TWIN FALLSID83202 Burley, ID 83318		3. <u>New</u> Registered Agent Signature.			
						REINSTATEMENT FEE DUE: \$30.00
4. Corporations: Enter Nam Office Held Nam		dresses of President, Secretary, Director Street or PO Address	s and(optional) City		Country Postal Code	
President Bok	Roberts	2058 Overland Avenue	Burley	ID	83318	
			·			
	a a				·	
5. Organized Under the Lan	ws of: 6. Signature	: Door Toon	>		Date: 11/1 (07	
C 119144	Name (ty	/pe or print): Bob Roberts			Title: President	
Issued 11/02/2007 by LG						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not</u> put "seme as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.