

No. C 103991		Reinstatement Annual Report Form ADMIN DISSOLVED 02/07/2005		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. B & B RESTAURANTS, INC. EDMOND GAIENNIE 6125 FAIRVIEW AVE BOISE ID 83704		EDMOND GAIENNIE 6125 FAIRVIEW AVE BOISE ID 83704 10464 W WATERWAY CT BOISE ID 83714	
		3. New Registered Agent Signature.			
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
PRESIDENT	EDMOND GAIENNIE	10464 W WATERWAY CT	BOISE ID	ADA	83714
SECT	KAREN GAIENNIE	10464 W WATERWAY CT	BOISE ID	ADA	83714
5. Organized Under the Laws of: IDAHO C 103991		6. Signature: <u>Ed Gaiennie</u> Date: <u>6/24/11</u> Name (type or print): <u>ED GAIENNIE</u> Title: <u>PRES</u>			

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM