No. C 192217		Due no later than Sep 30, 2012			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SHAWNA M. HOWE, CPA, PC SHAWNA HOWE 457 BLUE LAKES BLVD SOUTH TWIN FALLS ID 83301		SHAWNA M HOWE 457 BLUE LAKES BLVD SOUTH TWIN FALLS ID 83301 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ages Addresses o	of Procident Secretary and Directors T	reacurer ((ontional)			
Office Held	Name	1033 Addi 03303 0	Street or PO Address	i casarci (City	State	Country	Postal Code
PRESIDENT	SHAWNA HOWE		457 BLUE LAKES BLVD. SOUT	Ή	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 192217		Signature: Shawna Howe			Date: 07/13/2012			
		Name (type or print): Shawna Howe			Title: President			
Processed 07/13/2012	* Electronically provided signatures are accepted as original signatures.							