

No. C 174545 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN DISSOLVED 11/06/2008 1. Mailing Address - Correct in this box, if applicable ADAMS EYECARE INC. 2103 N CASSIA NAMPA, ID 83651	2. Registered Agent and Office NOT A P.O. BOX ADAM HEINER 2103 N CASSIA NAMPA, ID 83651 3. <u>New</u> registered agent signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>owner President</td><td>Adam Heiner</td><td>2103 N Cassia</td><td>Nampa</td><td>Id</td><td>83651</td></tr></tbody></table>			Office held	Name	Street or P.O. Address	City	State	Zip	owner President	Adam Heiner	2103 N Cassia	Nampa	Id	83651
Office held	Name	Street or P.O. Address	City	State	Zip									
owner President	Adam Heiner	2103 N Cassia	Nampa	Id	83651									
5. Organized under the laws of: IDAHO C 174545	6. Signature <u>Adam Heiner</u> Date <u>12-8-08</u> Name (Typed or Printed) <u>Adam Heiner</u> Title <u>President</u>													