

D. C104646		Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *		1. Mailing Address - Please Correct, If Not Correct		DEBORAH SILVER 2188 ADDISON AVE E TWIN FALLS ID 83301																									
		DEBORAH SILVER, CPA, CHARTER DEBORAH SILVER PO BOX 293 TWIN FALLS ID 83301		3. Organized Under the Laws of: ID C104646																									
Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																													
<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>Pres.</td><td>Dir Deborah Silver</td><td>P.O. Box 293</td><td>Twin Falls</td><td>ID</td><td>83301</td></tr><tr><td>Secy</td><td>Pres. - Dr LeRoy Hayes</td><td>" " "</td><td>" "</td><td>" "</td><td>" "</td></tr><tr><td>Secretary</td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>						Office held	Name	Street or P.O. Address	City	State	Zip	Pres.	Dir Deborah Silver	P.O. Box 293	Twin Falls	ID	83301	Secy	Pres. - Dr LeRoy Hayes	" " "	" "	" "	" "	Secretary					
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Secretary																													
Signature of New Registered Agent		6. Signature <u>Deborah Silver</u> Date <u>7-14-99</u> Name (Typed or Printed) _____ Title _____																											

ISSUED: 07-03-1999

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