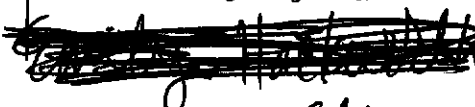





No. C 150544  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  TORCH PLUMBING, INC  PO BOX 174 SUGAR CITY ID 83448	<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> JEFFREY HACKWORTH 266 NORTH 2450 EAST ST ANTHONY ID 83448  <b>3. New Registered Agent Signature.</b> 																					
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.</b> <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Jeff Hackworth</td> <td>PO Box 174 Sugar City</td> <td>ID</td> <td>FR</td> <td></td> <td>83448</td> </tr> <tr> <td>Secretary</td> <td>Emily Hackworth</td> <td>SAME</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Jeff Hackworth	PO Box 174 Sugar City	ID	FR		83448	Secretary	Emily Hackworth	SAME				
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<b>5. Organized Under the Laws of:</b>  IDAHO C 150544	<b>6.</b> <table border="1"> <tr> <td>Signature: </td> <td>Date: 7-12-10</td> </tr> <tr> <td>Name (type or print): Jeff Hackworth</td> <td>Title: Pres.</td> </tr> </table>		Signature: 	Date: 7-12-10	Name (type or print): Jeff Hackworth	Title: Pres.																	
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Issued 05/24/2010 by LJM

### 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