| No. C 101366 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Due no later than Mar 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. STONCOR GROUP, INC. PO BOX 308 MAPLE SHADE NJ 08052 | | 2. Registered Agent and Office (NOT A P.O. BOX) UNITED STATES CORPORATION CO 1401 SHORELINE DR STE 2 BOISE ID 83702 | | |
|---|--------------------|--|--|--|----------|-------------------------|
| | | | | 3. <u>New</u> Registered Agent Signature. | | |
| 4. Corporations: En Office Held | nter Names Name | and Business Addresses | of President, Secretary, Directo Street or PO Address | n and(optional) Treasure City State | | Postal Code |
| President Director | David | d P. Reif | 1000 East Park Ave | e., Maple Shade | , nj usa | 08052 |
| Secretary | Edwar | rd W. Moore | 2628 Pearl Rd., Me | edina, OH | USA | 44256 |
| Treasurer Director Director | Frank C. Sullivan | | 1000 East Park Ave 2628 Pearl Road, M 2628 Pearl Road, M | Medina, OH | USA | 08052 44256 44256 |
| 5. Organized Under the Laws of: 6. DELAWARE Signature: 0 | | | While OM/ | Temp . | | G1.26. |
| C 101366 Name (type | | Name (type or p | rint) MAYKE. McG | <u>soigle</u> | Title: \ | rcasure |
| Issued 01/19/2010 | by SL1 | | | · · · · · · · · · · · · · · · · · · · | 20: | 1003001385 |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Fersonal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security autobars.

If the Corporation is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are evallable on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the Corporation to terminate the legal existance. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED