

No. C 147277		Due no later than Jan 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. SALTAGA, INC. SAMIR SALTAGA 766 NEWPORT TWIN FALLS ID 83301		SAMIR SALTAGA 766 NEWPORT TWIN FALLS 83301			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	SAMIR SALTAGA	766 NEWPORT STREET	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID C 147277		6. Annual Report must be signed.* Signature: samir saltaga Name (type or print): samir saltaga Date: 11/17/2014 Title: president					
Processed 11/17/2014 * Electronically provided signatures are accepted as original signatures.							