No. C 214144		Due no later than Jun 30, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. DR CHAVES, INC. RALPH ALLEN CHAVES 4250 COUNTY LINE RD EMMETT ID 83617		202 E MOS MERIDIAN	JOSHUA CHAVES 202 E MOSKEE MERIDIAN ID 83646 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ess Addresses of F	President Secretary and Directors Treas	surer (ontional)				
Office Held	Name	cos / tadi cosco oi i	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR SECRETARY PRESIDENT	RALPH ALLEN CHAVES RALPH ALLEN CHAVES RALPH ALLEN CHAVES		4250 COUNTY LINE RD 4250 COUNTY LINE RD 4250 COUNTY LINE RD	EMMETT EMMETT EMMETT	ID ID ID	USA USA USA	83617 83617 83617	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 214144		Signature: Ralph Chaves Name (type or print): Ralph Chaves			Date: 04/22/2018 Title: President			
Processed 04/22/2018	* Electronically provided signatures are accepted as original signatures.							