No. C1144	/ 3	Annual Report Form Due No Later Than November 30, 193	2. Registered Agent	and Office NOT A P.O. BOX
Return to: SECRETARY OF ST	ATE 1. Mailing	Address - Please Correct, If Not Correct		MILLER
700 WEST JEFFERS PO BOX 83720	SON MILL		4542 DXB	JRW PE
BOISE, ID 83720-00	1 , 5 , 5	SHELLY MILLER 4542 OXBORW PL	30185	ID 83713
NO FEE REQUIR	ED +342		3. Organized Under	3. Organized Under the Laws of:
* FIRST NOT		TD 83713 of President, Secretary and Directors	15	C114493
Limited Liability (cer ivames and Addresses companies: Enter Names ar		ers (check one)	
Office held	<u>Name</u>	Street or P.O. Address	City	State Zip
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		S Loorify that this Assuel Bases has been		
NATURE OF	JUSINESS	I certify that this Annual Report has bee knowledge true, carrect and complete.		
ponstruc	tions	Signature XXXX	<u> Dillin</u> Date _	(-31 4(a

ANY LAWF	UL TO	Name (Typed or Shelly L. Mil	******	
ANY LAWF	01_ 07-06-1996	- 101 011	Ur Title	
ANY LAWF	<u> </u>	- 101 011	Ur Title	President
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ANY LAWF	<u> </u>	- 101 011	Ur Title	President