


No. C 161466		Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) EDDIE JONES 577 BUCHANAN ST TWIN FALLS ID 83301 1140 7th Avenue East Twin Falls, ID 83301																						
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. E J ENTERPRISE HLDGS, INC. EDDIE JONES 577 BUCHANAN ST 1140 7th Ave East TWIN FALLS ID 83301		3. New Registered Agent Signature.																						
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <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>Eddie Jones</td><td>1140 7th Avenue East,</td><td>Twin Falls,</td><td></td><td></td><td>83301</td></tr><tr><td></td><td></td><td></td><td>Twin Falls, ID</td><td></td><td></td><td>83301</td></tr></tbody></table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Eddie Jones	1140 7th Avenue East,	Twin Falls,			83301				Twin Falls, ID			83301
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			Twin Falls, ID			83301																				
5. Organized Under the Laws of: IDAHO C 161466		6. Signature:  Date: _____ Name (type or print): <u>Eddie Jones</u> Title: <u>President</u>																								

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM