

No. C 158874	Due no later than Feb 28, 2011 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. ULM, INC. TAMARA WOLFE 930 NORTH COLE ROAD BOISE ID 83704		TAMARA WOLFE 322 MARK STREET BOISE ID 83705			
			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	TAMARA WOLFE	930 NORTH COLE ROAD	BOISE	ID	USA	83704
5. Organized Under the Laws of: ID C 158874	6. Annual Report must be signed.* Signature: Tamara Wolfe Name (type or print): Tamara Wolfe		Date: 12/13/2010 Title: President			
Processed 12/13/2010		* Electronically provided signatures are accepted as original signatures.				