No. **C 151883**	**Due no later than Nov 30, 2009** **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.** ORA ET LABORA INC. CARRIE SUMMERLIN E 805 TIMBER LANE COEUR D'ALENE ID 83815 USA	JOHNNY D SUMMERLIN E 805 TIMBER LANE COEUR D'ALENE ID 83815 3. New 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	JOHNNY D. SUMMERLIN	E 805 TIMBER LANE	COEUR D ALENE	ID	USA	83815

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 151883**	Signature: Carrie Summerlin	Date: 10/12/2009
	Name (type or print): Carrie Summerlin	Title: Bookkeeper

Processed 10/12/2009

* Electronically provided signatures are accepted as original signatures.