

FILED EFFECTIVE

REINSTATEMENT

No. C 166387	Annual Report Form ADMIN DISSOLVED 07/06/2007	2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable ALPHA OMEGA REPORTING, INC. 702 ANTELOPE WAY CALDWELL, ID 83607	MICHAEL S LUCERO 702 ANTELOPE WAY CALDWELL, ID 83607 3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="0"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>President</td><td>Michael S. Lucero</td><td>702 Antelope Way</td><td>Caldwell</td><td>ID</td><td>83607</td></tr><tr><td>Secretary/Treasurer</td><td>Denise Lucero</td><td>702 Antelope Way</td><td>Caldwell</td><td>ID</td><td>83607</td></tr></tbody></table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Michael S. Lucero	702 Antelope Way	Caldwell	ID	83607	Secretary/Treasurer	Denise Lucero	702 Antelope Way	Caldwell	ID	83607
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5. Organized under the laws of: IDAHO C 166387	6. Signature <u>Michael S. Lucero</u> Date <u>11.14.07</u> Name (Typed or Printed) <u>Michael S. Lucero</u> Title <u>President</u>																			

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