| No. C 161472 | | Due no | 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 | | Annual Report Form | | TAMEA TAKESHITA 12375 W. CHINDEN BLVD SUITE E BOISE ID 83713 3. New Registered Agent Signature:* | | | |
| | | 1. Mailing Address: Correct in this box if needed. DINNER THYME SOLUTION, INC. TAMEA TAKESHITA 12375 W CHINDEN BLVD SUITE E BOISE ID 83713 | | | | | |
| | | | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| SECRETARY | TAMEA TAH | ŒSHITA | 112375 W. CHINDEN BLVD SUITE E | BOISE | ID | USA | 83713 |
| DDECTDENT | KATHY KILN | ITAICTED | | | | | |
| PRESIDENT | MAITT NILI | IINS I ER | 12375 W. CHINDEN BLVD SUITE E | BOISE | ID | USA | 83713 |
| 5. Organized Under th | | 6. Annual Report mus | | BOISE | ID | USA | 83713 |
| | | | t be signed.* | BOISE | | USA 07/14/2015 | 83713 |
| 5. Organized Under th | ne Laws of: | 6. Annual Report mus Signature: tAMEA t | t be signed.* | BOISE | Date: (| | 83713 |