

No. C 101875		Due no later than Apr 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. FIRST STREET MEETING ROOM, INC. HAROLD KLASSEN 2054 S 2950 W ABERDEEN ID 83210 USA		HAROLD KLASSEN 2050 S 2950 W ABERDEEN ID 83210			
						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	HAROLD KLASSEN	2054 S 2950 W	ABERDEEN	ID	USA	83210	
TREASURER	MICHAEL S BRIEN	2930 W 2100 S	ABERDEEN	ID	USA	83210	
SECRETARY	MICHAEL KLASSEN	2092 S 2900 W	ABERDEEN	ID	USA	83210	
5. Organized Under the Laws of: ID C 101875		6. Annual Report must be signed.* Signature: Michael S. brien Name (type or print): Michael S. brien					
		Date: 04/06/2009 Title: Treasurer					
Processed 04/06/2009		* Electronically provided signatures are accepted as original signatures.					