

No. <b>C 136662</b>	<b>Due no later than Dec 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b> TONY URANGA 4308 CEMETERY ROAD MARSING ID 83639-8362			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> TXOKO ONA, INC. TONY R URANGA PO BOX 1163 HOMEDALE ID 83628		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
SECRETARY	LEANDA URANGA	P.O. BOX 626	HOMEDALE	ID	USA	83628
DIRECTOR	CHRISTINE HELDT	432 EAST FOREST RIDGE	MERIDIAN	ID	USA	83642
DIRECTOR	MARC ASUMENDI	P.O. BOX 156	HOMEDALE	ID	USA	83628
TREASURER	DANIEL URANGA	P.O. BOX 626	HOMEDALE	ID	USA	83628
DIRECTOR	DANIEL URANGA	P.O. BOX 626	HOMEDALE	ID	USA	83628
VICE PRESIDENT	MIKE FRANK	24405 HOSKINS ROAD	WILDER	ID	USA	83676
DIRECTOR	FRED EGURROLA	3990 JOHNSTONE ROAD	HOMEDALE	ID	USA	83628
PRESIDENT	JOHN I LEJARDI	229 EAST COLORADO AVE	HOMEDALE	ID	USA	83628
DIRECTOR	LORI AGUIRRE	25215 LOWER PLEASANT RIDGE RD	WILDER	ID	USA	83676
5. Organized Under the Laws of: <b>ID</b> <b>C 136662</b>		6. Annual Report must be signed.* Signature: John I. Lejardi Name (type or print): John I. Lejardi Date: 10/31/2017 Title: President				
Processed 10/31/2017		* Electronically provided signatures are accepted as original signatures.				