Nö.		Due no later than 6/30/2009 Annual Report Form	2. Registered Agent and Address (NO PO BOX)		
Return to:		Ailluai Report Form	CHERYL SCHULER		
450 NORTH FOURTH S PO BOX 83720	SECRETARY OF STATE	<ol> <li>Mailing Address: Correct in this box if needed.</li> </ol>	509 2ND ST SOUTH     NAMPA ID 83651  3. New Registered Agent Signature:		
	450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	SNG - 2ND STREET DELI, INC. 509 2ND ST SOUTH NAMPA ID 83651			
RE	NO FILING FEE IF RECEIVED BY DUE DATE				
4. Co	rporations: Enter Names and I	Business Addresses of President, Secretary and Directors.			
Offic	e Held Name	Street or PO Address	City	State	Zip
Pro	sidout - Gaur	Schuler - SO9 2ND ST SOUTH	1 NMPA	Σď	83651
Seci	ndary - Chenyl	Schuler - 509 2ND ST SOUTH	H NAMPA	<b>I</b> 9	12988
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				<u>.</u>	
5. Or		6. Annual Report must be signed.		٠	·
	ID	Signature: DUD		Date: 04	· 12-41
	C 106826	Name(type or print): Gary Schule	<u>r</u>	Title: Pres	1 Jun 6,
Issu	ued 4/13/2009 by SLD	(		200	906001396