| No. C 213977 | | A CONTRACTOR OF THE PROPERTY O | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|---|------|--|----------------------|--|----------|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TRANSNIFICANT INCORPORATED NIKOA HOLLIS 3145 S SIGNORELLO LN MERIDIAN ID 83642 | | NIKOA HOLLIS 3145 S SIGNORELLO LN MERIDIAN ID 83642 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 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 |
| DIRECTOR PATRICK OW | | VEN | 3145 S SIGNORELLO | LN | MERIDIAN | ID | | 83642 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Nikoa Hollis | | Date: 08/29/2018 | | | | |
| C 213977 | | Name (type or print): Nikoa Hollis | | Title: Executive Director | | | | |
| Processed 08/29/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |