

|                                                                                                                                                        |                 |                                                                                                                                                 |             |                                                      |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|---------|-------------|--|
| No. <b>C 122248</b>                                                                                                                                    |                 | <b>Due no later than Jan 31, 2011</b>                                                                                                           |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>   |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>HART PHOTOGRAPHY, INC.<br>M LEON LARSEN<br>312 N RIDGE<br>IDAHO FALLS ID 83402 |             | M LEON LARSEN<br>312 N RIDGE<br>IDAHO FALLS ID 83402 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                 |             | 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                                                                                                                                              | PAMELA K LARSEN | 312 NORTH RIDGE                                                                                                                                 | Idaho Falls | Id                                                   | USA     | 83402       |  |
| PRESIDENT                                                                                                                                              | M LEON LARSEN   | 312 NORTH RIDGE                                                                                                                                 | IDAHO FALLS | ID                                                   | USA     | 83402       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 122248</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Leon Larsen<br>Name (type or print): Leon Larsen                                                |             |                                                      |         |             |  |
| Date: 01/19/2011<br>Title: President                                                                                                                   |                 |                                                                                                                                                 |             |                                                      |         |             |  |
| Processed 01/19/2011                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                       |             |                                                      |         |             |  |