

No. C 164727		Reinstatement Annual Report Form ADMIN DISSOLVED 04/26/2016		2. Registered Agent and Office (NOT A P.O. BOX) JAMES IRVINE 1764 E STATE ST EAGLE ID 83616	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CABINET CONCEPTS INC JIM M. IRVINE 1764 E STATE ST EAGLE ID 83616		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Office Held Name Street or PO Address City State Country Postal Code President James M. Irvine 1764 E State Eagle Id USA 83616					
5. Organized Under the Laws of: IDAHO C 164727		6. Signature:  Name (type or print): <u>JAMES M. IRVINE</u>		Date: <u>5-3-16</u> Title: <u>5-3-16</u>	

Issued 05/03/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM