

No. C 161548

Due no later than July 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

F.A.T. INC
1671 UPPER PACK RIVER RD
SANDPOINT, ID 83864

AMANDA TUCHON
1671 UPPER PACK RIVER RD
SANDPOINT, ID 83864

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|---------------|-------------------------------|-------------|--------------|------------|
| Pres | Amanda | 1671 Upper Pack River Rd, | Shoshone | ID | 83864 |
| Treas. | Tuchon | | | | |
| Sec | FATIMA | " | " | " | " |
| | IBRAHIM | | " | " | " |
| V Pres | Amanda Tuchon | | | | |

5. Organized Under the Laws of:

IDAHO
C 161548

6.

Signature

Linda Flores

Date

5/28/07

Name

(Typed or
Printed)

Linda Flores

Title

Office
Mgr