No. C 202013		Due no later than Apr 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. PARADISE FIRE PROTECTION INC. THOMAS WILLIAMS 540 W SAMARIA LN MALAD ID 83252		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	PARADISE THOMAS 540 W SA			THOMAS WILLIAMS 540 W SAMARIA LN MALAD ID 83252 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names a		s of President, Secretary, and Directors. Trea	asurer (ontional)				
Office Held Nam		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT JOH	n Blankman	700 W 1700 S STE 100	LOGAN	υT		84321	
5. Organized Under the Laws o UT C 202013	Signature	eport must be signed.* : John Blankman pe or print): John Blankman		Date: 03/01/2017 Title: President			
Processed 03/01/2017	* Electronica	* Electronically provided signatures are accepted as original signatures.					