| No. C 190590 | Due no later than Mar 31, 2015 2. Registered Agent and Address (NO PO BOX) | | | | | |
|--|--|---|--|----------------|-------------------|--|
| Return to: | | nual Report Form | INCORP SERVICES, INC. | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 WATERSHAPE CON DAVID J. PETERS 140 LOMAS SANTA | | SON A FE DR STE 202 | 1524 S VISTA AVE STE 12 BOISE 83705 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | SOLANA BEACH CA 92075-1252 USA | | 5. INCOVE REGISTER CA AGENT SIGNATURE. | | | |
| 4. Corporations: Enter Names and Bus | iness Addresses of Pres | sident, Secretary, and Directors. Treasurer | (optional). | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code |
| SECRETARY JENNIFER | RETARY JENNIFER M PETERSON | | Solana Beach Solana Beach La Jolla | CA CA CA | USA USA USA | 92075-1252 92075-1252 92037-1252 |
| 5. Organized Under the Laws of: 6. Annual Report mus | | ust be signed.* | | | | |
| CA Signature: David Pe | | Peterson | Date: 01/22/2015 | | | |
| C 190590 Name (type or pr | | int): David Peterson | Title: President | | | |
| Processed 01/22/2015 | * Electronically provided signatures are accepted as original signatures. | | | | | |