

|                                                                                                                                                        |                |                                                                             |      |                                                     |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------|------|-----------------------------------------------------|------------------|-------------|--|
| No. <b>C 138362</b>                                                                                                                                    |                | <b>Due no later than Mar 31, 2009</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>Annual Report Form</b>                                                   |      | DEAN NIELSEN<br>809 WEST 100 NORTH<br>PAUL ID 83347 |                  |             |  |
|                                                                                                                                                        |                | <b>1. Mailing Address: Correct in this box if needed.</b>                   |      | 3. <u>New</u> Registered Agent Signature:*          |                  |             |  |
|                                                                                                                                                        |                | VALLIVUE FARMS, INC.<br>DEAN NIELSEN<br>809 W 100 N<br>PAUL ID 83347<br>USA |      |                                                     |                  |             |  |
| 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 |  |
| PRESIDENT                                                                                                                                              | ADAM D NIELSEN | 781 W 100 N                                                                 | PAUL | ID                                                  | USA              | 83347       |  |
| SECRETARY                                                                                                                                              | DEAN NIELSEN   | 809 W 100 N                                                                 | PAUL | ID                                                  | USA              | 83347       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                           |      |                                                     |                  |             |  |
| <b>ID<br/>C 138362</b>                                                                                                                                 |                | Signature: Dean Nielsen                                                     |      |                                                     | Date: 01/16/2009 |             |  |
|                                                                                                                                                        |                | Name (type or print): Dean Nielsen                                          |      |                                                     | Title: Secretary |             |  |
| Processed 01/16/2009                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.   |      |                                                     |                  |             |  |