



# Idaho Limited Liability Company Annual Report Form

File online at: [sosbiz.idaho.gov](https://sosbiz.idaho.gov)



Return completed form within 30 days to:

Idaho Secretary of State  
Attn: Annual Reports  
450 North 4th Street  
Boise, ID 83720  
Phone: (208) 334-2300

For Office Use Only

**-FILED-**

File #: 0005944450

Date Filed: 10/17/2024 2:00:00 PM

Due no later than: 08/31/2024

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 358970

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 08/27/2012

Formation Locale: ID

**Name and Mailing Address:**

(1) Add or Change Mailing Address:

VIKTORY REAL ESTATE ONE LLC  
17420 COPPER SPUR AVE  
NAMPA, ID 83687-9087

**Registered Agent (RA) and Registered Office (RO) Address:**

(2) Change RA and/or RO Address:

VIKTOR N. POLYAKOV  
17420 COPPER SPUR AVE  
NAMPA, ID 83687

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	VIKTOR N. POLYAKOV	17420 COPPER SPUR AVE, NAMPA, ID 83687	NAMPA, ID 83687
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	OLGA POLYAKOV	17420 COPPER SPUR AVE, NAMPA, ID 83687	NAMPA, ID 83687
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	BENJAMIN POLYAKOV	17420 COPPER SPUR AVE, NAMPA, ID 83687	NAMPA, ID 83687
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

(6) Date:

(7) Type/Print Name:

(8) Title:

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0932-8257 10/17/2024 2:00 PM Received by Office of Idaho Secretary of State